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| ANIMAL SAMPLE TAG | Office use only  Registry Case No. \_\_\_\_\_\_\_\_\_\_\_\_ |
| Submitter Information | **Animal Information** |
| Submitter name: | Species: |
| Dept/Organisation: | ID: |
| Address: | ARKS/Arrival ID:  Date of Death: |
| Email: | Sex: Male / Female / Unknown  Age:  Weight: g/kg |
| Phone: | Enclosure/Suburb: |
| Clinician: | Number affected:  Number dead: |
| Housed with: |
| Prosecutor: | Euthanased: No / Yes  Method: |
| State: Fresh / Decomposed / Frozen / Fixed  Where born/hatched:  Wild / feral / zoo / private / farm |
| History / Circumstance of death: | |