

NORTHSTAR MI LABORATORIES

Local/Hlr/Producer # _____ Sample Date _____

Member Name _____

Sample ID _____

BLV ELISA

Johne's ELISA

Johne's PCR

Pregnancy

Refer to Michigan Milk Messenger Premiums page for current pricing. The cost of testing is the responsibility of the producer. This card MUST be filled out completely when sending in samples to be tested by NorthStar Lab to avoid potential service