

Tauros Diagnostik GbR
 Niederwall 5
 D-33602 Bielefeld

If you would like to receive an automatic message about the progress of your order, please enter your email address here:

(clear block letters, please)

I confirm the payment of this order in favour of Tauros Diagnostik.

Sparkasse Bielefeld
 IBAN: DE95 4805 0161 0000 0394 12
 BIC: SPBIDE3BXXX

Please indicate your name in the reference area of your bank transfer form.

Analysis Order Form (Birds) (Please fill in with clearly readable block letters and mark the desired diagnostic.)

Last Name: _____ Street: _____
 First Name: _____ Tel.: _____
 Postcode: _____ Fax: _____
 City / Country: _____ e-mail: _____

Important: Please use fresh disposable gloves for each bird during the sampling procedure for detecting pathogenic organisms!

- Sexing** = DNA-sexing (freshly plucked feathers)
- Chlamydiosis** = Chlamydia psittaci (blood, cloaca swab, faeces)
- PBFD** = Circovirus (blood, bloodfeather, cloaca swab)
- APV** = Polyomavirus (blood, freshly plucked feathers)
- PDD** = Bornavirus (cloaca swab, blood)

Species	Identification (Ring number)	Sexing	Chlamydiosis	PBFD	APV	PDD
1) _____		<input type="checkbox"/>				
2) _____		<input type="checkbox"/>				
3) _____		<input type="checkbox"/>				
4) _____		<input type="checkbox"/>				
5) _____		<input type="checkbox"/>				
6) _____		<input type="checkbox"/>				
7) _____		<input type="checkbox"/>				
8) _____		<input type="checkbox"/>				
9) _____		<input type="checkbox"/>				
10) _____		<input type="checkbox"/>				

Request: Sample Material (please fill in the desired number) Bags: Swabs: Order form:

 City/Date Signature