

## BIOGENETIC SERVICES, INC.

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## Protein (ELISA Plate) based GMO/Transgenic Event Testing of Bulked Seed, Grain, Feed or Food Samples PACKING SLIP

\*\* Please include a copy of this packing slip with the samples

Billing Company Name & Address:			Address of Sender (if	Address of Sender (if different from Billing):	
Contact Persor	n:		Date Sample Sent to BGS:		
Telephone No:			Commodity/Product:		
Fax No:			Date Received at BGS:		
Email:			Courier used:		
Requested	Services:				
Qualitative E	LISA Plate Tests	<u>s:</u>			
]	] CP4 (EPSPS) -	Soybean RR (also soymeal, full fat fl	our, defatted flakes), Corn RR (NK603)	, Cotton	
]	[ ] Cry1Ab - Corn (Mon809, Mon810, Bt11, E176)				
]	[ ] Cry9C - Corn (CBH351, Starlink)				
Ι	] T25 - Corn (PAT	Γ, BAR, Liberty Link)			
-	] Cry3Bb - Corn (	,			
-	] Cry1F - Corn (H	•			
[ ] Cry1Ac - Cotton (Bollgard I)					
[ ] Cry2A - Cotton (Bollgard II)					
[	] Cry3A - Potato,	(New leaf, New leaf+, New leaf y)			
<b>Quantitative</b>	ELISA Plate Tes	<u>ts:</u>			
1	] Cry1Ab - Corn (	Mon809, Mon810, Bt11, E176) (~0.1	5% detection level)		
1	] Cry9C - Corn (C	BH351, Starlink) (~0.04% detection	level)		
1	] Cry1F - Corn (H	erculex)			
[	] CP4 (EPSPS) -	Soybean RR (~0.05% detection leve	I)		
_		or other available ELISA Plate Test	s.		
	<b>GS #</b> I BGS Use Only	Customer Sar	mple Identification	Notes	
)					
Attach additio	nal pages as need	ed for samples.			
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		Warranty a	and Liability Limitations		
mple analyzed at a sed on analytical re d negligence with r	particular point in time esults provided by BGS espect to a test is limit	e. Biogenetic Services, Inc. makes no war S. Liability for damage for any cause, inclu	rranties, expressed or implied including warn uding breach of contract or agreement (inclu ample. This remedy is exclusive and in no e	he results provided are representative only of the anty of ability to market a commodity or product ding estimated turnaround time), breach of warranty event shall BGS or any of its employees be held	
NOTE:			lb. of ground corn or soybean should be prov	vided for each sample.	
	hod (check one)		[]Fax []Email []Mail		
BGS Office Use	e Only:	Date Deald			
Company #:		Date Rec'd:			
Type of Sample		Bate Need.			