Public reporting burden for this collection of information is estimated to average .50 hours per response, including the time for reviewing instructions, searching exis maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of th including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, Room 404-W, Washington, DC 20250; and to the Office of I					ne collection of information, certification being made for authenticity of samples of product.				
Office of Management and Budget, Washington, DC 20503. U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE				1. DATE SUBMITTE	OMB NO. 0579-0013 1. DATE SUBMITTED 2. FIRM LICENSE NO.				
SHIPMENT AND RECEIPT OF BIOLOGICS SAMPLES					3. NAME AND MAILING ADDRESS OF FIRM (Include Zip Code)				
INSTRUCTIONS: Submit original and one copy with samples. (Leave carbons in				_					
4. PURPOSE									
ROUTINE CONCURRENT SAMPLE MASTER SEED	CELL LINE F	RELICENSING SAMPLE							
RETENTION SAMPLE RESUBMISSION (Specify in remarks)) OTHER (Speci	fy in remarks)							
5. HOW IS PRODUCT SHIPPED		OTHER (Specify) PRODUCT IS SHIPPED VIA							
DRY ICE REFRIGERATED UNREFRIGER	ATED								
PRODUCT NAME (No trade names) (Only one entry per line)	PRODUCT CODE	055141		SAMPLE CODE For Gov't Use Only)	S	SAMPLE CONTAINERS SUBMITTED INDICATE			
		SERIAL NO.	(F		NO.	SIZE	FIELD DOSE	BULK OR FINAL	
6.	7.	8.		9.	10.	11.	12.	13.	
					10.		12.		
-									
I certify that I am an authorized government sampler and the and are submitted in accordance with 9 CFR 113.3.	samples listed abov	e were selected	16. REMARKS						
14. SIGNATURE OF AUTHORIZED GOVERNMENT SAMPLER	15.	DATE	-						
Telephone Number									
	A	CKNOWLEDGEME	NT OF RECEIPT C						
17. CONDITION AND REMARKS					18. RECEIVED BY (Signature)				
				40.51					
					19. DATE RECEIVED				
APHIS FORM 2020				I					