



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Mosquito Pool Submission Form

IDAHO BUREAU OF LABORATORIES

2220 Old Penitentiary Rd, Boise, ID 83712

StateLab.idaho.gov Tel: 208-334-2235 Fax: 208-334-4067

IBLClinical@dhw.idaho.gov

COMPLETE ALL INFORMATION:

Primary Contact:		Abatement District:		<i>Laboratory Use only: Affix Workorder Label Here</i>
Mailing Address:			City, State, Zip:	
Tel:	Fax:	Email:		

	Trap Location	County	Collection Date:	Mosquitos		Ramp Result <i>(if run)</i>
				Species	# per tube (up to 50)	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

Comments: _____