

## SAMPLE SUBMISSION FORM FOR ISOLATE IDENTIFICATION BY PCR

Filed by submitter			
Company name		Results to be sent to (name, address or email)	
Address		Report will be sent by (mark with an x)	Digitally signed report by email
			Copy of report by email
			Sent by post
Submitters name and signature		Phone	
Email			

Sample information						Isolate information		Sample ID at Põhjala Lab (filled by reciever)
Sample ID from submitter	Purpose for analysis	Sampling date	Sample type	Sample name	Sample origin	Name of isolated microbe (if known)	Date of isolation	

PCR analyses to be done (mark with x)		Filed by the laboratory	
Pediococcus and Lactobacillus	<input type="checkbox"/>	Arrival date and time of sample(s)	
Wild Yeast Dekkera Species	<input type="checkbox"/>		
Saccaromyces diastaticus	<input type="checkbox"/>	Name	
Megasphaera and Pectinatus	<input type="checkbox"/>	Signature	
Brettanomyces bruxellensis	<input type="checkbox"/>		