

**REQUEST FOR RELEASE**  
**PHA Status, TH Status and DNA sample**  
**From AgriGenomics to AMAA**

Owner's Name \_\_\_\_\_ Farm/Ranch Name \_\_\_\_\_ AMAA Breeder Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (M) \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

	ANIMAL INFORMATION						LABORATORY USE ONLY			
<i>AgriGenomics Lab ID</i>	<i>AMAA Registered Name</i>	<i>AMAA # Registration</i>	<i>AMAA # Sire</i>	<i>AMAA # Dam</i>	<i>PHA Status</i>	<i>TH Status</i>	<i>FTA Card #</i>	<i>Case #</i>	<i>Sire Status</i>	<i>Dam Status</i>
1.										
2.										
3.										
4.										
5.										
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7.										
8.										
9.										
10.										
11.										
12.										

**RELEASE AUTHORIZATION:**

I hereby authorize AgriGenomics, Inc. to release the Tibial Hemimelia (TH) and Pulmonary Hypoplasia with Anasarca (PHA) status for the above-referenced animals to the American Maine-Anjou Association (AMAA) for public use.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE RETURN TO:**  
**AgriGenomics, Inc.**  
**2399 N 1000 East Road**  
**Mansfield, IL 61854**

Date Received by AgriGenomics \_\_\_\_\_ Date Received by AMAA \_\_\_\_\_ Date Received by AMAA Lab \_\_\_\_\_