FORM APPROVED OMB NO.: 0579-0104 Public reporting burden for this collection of information is estimated to average .17 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information, including suggestions for reducing this burden, to Department of Agriculture, Clearance Officer, OIRM, AG Box 7630, Washington, D.C. 20250, and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.

U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE PLANT PROTECTION AND QUARANTINE			1. INSECT NAME
INSECT COLLECTION WORKSHEET FOR			
•	GENOTYPE ANA	LYSIS	
COMPLETE FOR EACH TRAP CONTAINING SPECIMENS			
2. SUBMITTER'S NAME 3. SUBMITTER'S		3. SUBMITTER'S ADDRESS (Include Zip Code)	
4. SUBMITTER'S INTERNET EMAIL ADDRESS			
5. SUBMITTING AGENCY			*
	Other	Tel No. ()	Fax No. ()
State USDA	Organization		
TRAP DATA			
	T DATE OF LAST TRAD SUFOV		9. NEAREST PORT OF ENTRY (Include military bases)
6. DATE COLLECTED	7. DATE OF LAST TRAP CHECK	8. TRAP NUMBER	or near the state of the state
10. TRAP TYPE			
Delta	Milk Carton Light Tra	Other	
11. TRAP LOCATION			12. APPROXIMATE NUMBER OF SPECIMENS IN TRAP
Address:			
			13. OTHER LIFE STAGES COLLECTED (If submitted check appropriate
Town or City (or nearest one):			box and indicate approximate quantity)
the state of the s			IMPORTANT: One egg mass per
State:			Eggs: specimen bag. DO NOT mix egg masses.
State.			
County:			Larvae:
Longitude (if available):			Pupae:
Luigitude (ii available).			
Latitude (if available):			Female Adults:
Other Coordinates:			
14. SPECIAL TREATMENTS OF SPECIMENS (e.g., Freezing conditions, Use of alcohol, Prolonged storage conditions, Host if no trap used, etc.)			
45 CEMPTO			16. DATE SENT
15. SEND TO: Molecular Diagnostics Tel: 508-563-9303 USDA, APHIS Fax: 508-564-4398			IO. DATE SERI
Otis Methods Development Center Building # 1398			
Otis ANGB, MA 02542			
FOR LABORATORY USE ONLY			
DATE RECEIVED OTIS MDC ID NUMBER			