Thank you for participating in the Feline Tick/Lyme Disease Surveillance Program! Please answer the following questions and include this completed form with your submitted ticks.

Place ticks in **two sealed zip-lock bags, one inside the other** via overnight or priority carrier.

Name: ___________________________________________________

1. County and State where the tick(s) on the cat was collected?

   County: ______________________________

   State: ______________________________

2. Was the tick(s) walking on the cat when collected?  **Yes or No**

   OR

   Was the tick(s) attached in such a way that it had to be forcibly removed from the cat?

   **Yes or No**

3. What email should we use to send you the final results beginning in early 2016?

   Email: ___________________________________________________

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**Mail this form and ticks to:**

FHC Ticks
Cornell University
C4-114 VMC
930 Campus Road
Ithaca, NY 14853-6401
607.253.3394 – for shipping purposes only

**Questions?**

Email us at: fhcticks@cornell.edu

www.vet.cornell.edu/fhc