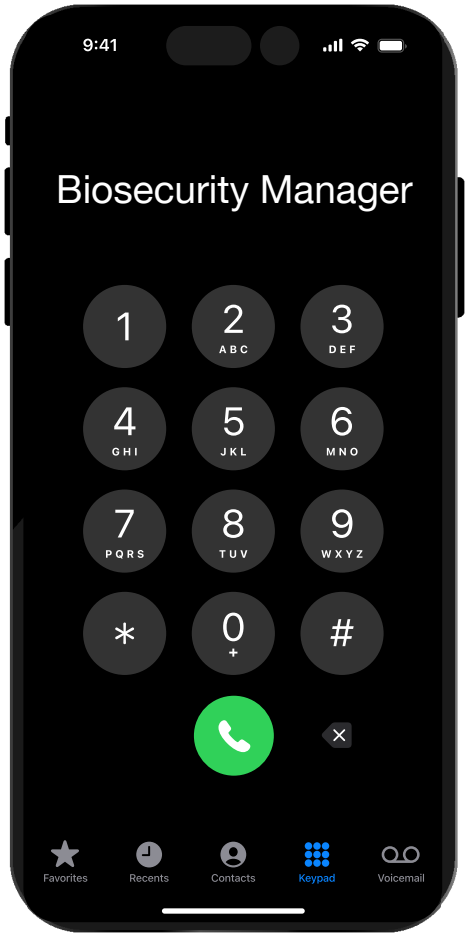
Biosecurity Manager Contact Info



Name: _____

Office Phone: _____

Mobile Phone: _____

Secondary Name: _____

Office Phone: _____

Mobile Phone: _____