Ojo,	id h.	i difici.	//	0	Ull	
This Equine Infectious Anemia (EIA) test was prod	cessed by an NVSL Accredited I	_aboratory —-GlobalVetLIN	IK's eEIA test form conta	ins all data fields as	found on federal forn	1 VS 10-11
GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST				EIA-3338411		
SERIAL NO. FL-3338411	LAB / ACCESSION NO.		SIGNED 11-01	110.	COUNTY AND	18,0
Forms Without Adequate Descriptions Of The Hor	se and Complete Addresses Inc	cluding Zip Codes, and Tele	phone Numbers Will No	Be Processed.	11/1/2	:43
NAME & ADDRESS OF OWNER ELIZABETH WILSON 6363 OLD MAHOGANY CT NAPLES FL 34109 Phone: 239-357-0154 PIN: NA / LID: NA VETERINARY LICENSE OR ACCREDITATION N NAN: 019963 CERTIFICATION OF FEDERALLY ACCREDITED SIGNATURE OF FEDERALLY ACCREDITED VE	Van Roeke Darrell Har 18321 N. (Alva, FL 33 Phone: 239 IO. TEST TYPE	Olga Dr. 3920 9-694-7177	PA	FLYING HOC 6461 SANDL NAPLES FL Phone: 239-5 PIN: NA / LIE REASON FOR Annual	EWOOD LN 34109 i96-3941 b: NA TESTING	
	. V.	.//.	>-	10,	76,0,	,50,
CERTIFICATION OF OWNER OR OWNER'S AGE SIGNATURE OF OWNER OR OWNER'S AGENT	. , , , , , , , , , , , , , , , , , , ,	ed this form and, to the bes	t of my knowledge and b	elief, this form is tru SIGNATURE NAM ELIZABETH WILS	E (3)	SIGNATURE DATE 2016-11-01
NAME OF HORSE VIEW POINT	ID1 BARN NAME: VINNIE	ID2		·	ID3	
COLOR Bay	AGE OR DO 01/01/2008		BREED Warmblood			GENDER Gelding
REMARKS:	VV-		. 412		-10	
	of Printes		Jin State of the S	Is for Arithe		
NARRATIVE DESCRIPTION:			-:()			N
HEAD: STAR/STRIP/SNIP	-A-		Z-Y	- ///		
LEFT FORELIMB:	· · · ·	14	FORELIMB:	. n.u		(♥1
OTHER MARKS AND BRANDS	,/9	RIGHT	THINDLIMB: SOCK		11/21-	180
OTHER MARKS AND BRANDS	. ~.		207	\ .	~~~	-710
RABIES VACCINATION		1		X	. 60	1/2
TYPE VACC. DATE	PRODUCT	SERIAL NUMBER	EXPIR. DATE	.all	ADMINISTERED E	BYO
FOR LABORATORY USE ONLY						
LABORATORY	ŤUBE NO.	DATE VIGITO DATE	RECEIVED	DATE REPORT	ED() TE	ST RESULTS

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SIGNATURE OF TECHNICIAN



TECHNICIAN

