

This Equine Infectious Anemia (EIA) test was processed by an NVSL Accredited Laboratory —GlobalVetLINK's eEIA test form contains all data fields as found on federal form VS 10-11

GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST **EIA-3533687**


SERIAL NO. VA-3533687	LAB / ACCESSION NO. W1711563	DATE SIGNED 2017-03-13	COUNTY
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Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, and Telephone Numbers Will Not Be Processed.

NAME & ADDRESS OF OWNER Katy Browne 7673 Old Carters Mill Road Marshall VA 20115 Phone: 540-270-4998 PIN: NA / LID: NA	NAME & ADDRESS OF VETERINARIAN Harrison Equine PLLC Ian Harrison DVM PO Box 996 Berryville, VA 22611 Phone: 540-955-3001	NAME & ADDRESS OF STABLE/MARKET Katy Browne 7673 Old Carters Mill Road Marshall VA 20115 Phone: 540-270-4998 PIN: NA / LID: NA
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VETERINARY LICENSE OR ACCREDITATION NO. NAN: 009346	TEST TYPE AGID	REASON FOR TESTING Annual
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CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN I certify the specimen submitted with this form was drawn by me from the horse described below on the day indicated below.

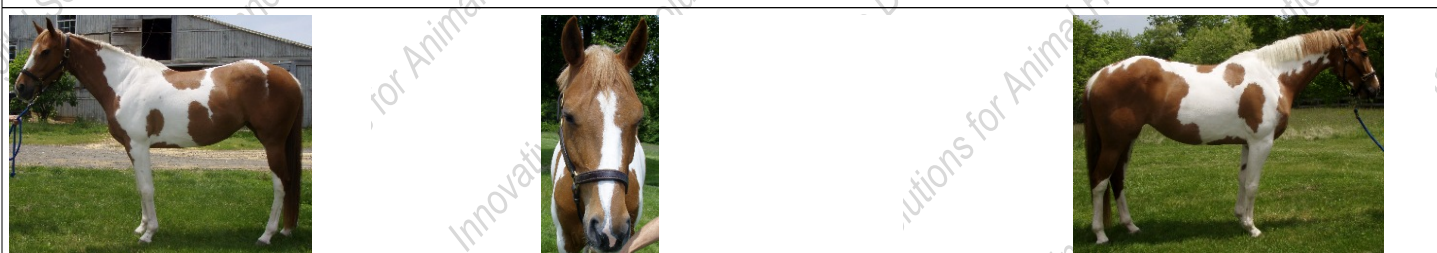
SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN  Ian Harrison DVM 2017-03-13 6:49 AM -08:00	SIGNATURE NAME Ian Harrison DVM	DATE BLOOD DRAWN 2017-03-13
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CERTIFICATION OF OWNER OR OWNER'S AGENT I certify that I have examined this form and, to the best of my knowledge and belief, this form is true, correct and complete.

SIGNATURE OF OWNER OR OWNER'S AGENT	SIGNATURE NAME Katy Browne	SIGNATURE DATE 2017-03-13
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NAME OF HORSE Hokulani	ID1	ID2	ID3
COLOR Chestnut/White	AGE OR DOB 9 years	BREED Dutch/Thoroughbred	GENDER Mare

REMARKS:



NARRATIVE DESCRIPTION:

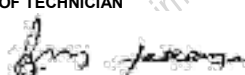
HEAD: Star, Strip, Snip, Lower Lip	
LEFT FORELIMB:	RIGHT FORELIMB:
LEFT HINDLIMB:	RIGHT HINDLIMB:
OTHER MARKS AND BRANDS MW@EL	

RABIES VACCINATION

TYPE	VACC. DATE	PRODUCT	SERIAL NUMBER	EXPIR. DATE	ADMINISTERED BY

FOR LABORATORY USE ONLY

LABORATORY Warrenton Regional Animal Health Laboratory 272 Academy Hill Rd Warrenton VA 20186	TUBE NO. 100153847-1	DATE RECEIVED 2017-03-15	DATE REPORTED 2017-03-17	TEST RESULTS Negative
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TECHNICIAN Gashaw Tessema	SIGNATURE OF TECHNICIAN  Gashaw Tessema 2017-03-17 5:09 AM -08:00
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NOTICE TO DOCUMENT INSPECTORS. This official document was authorized in agreement with the state of animal origin, issuing veterinarian, via GlobalVetLINK.com. Please address any questions related to this document with your state or issuing state veterinarian's office.