

See reverse for more OMS information.

FORM APPROVED - OMS NUMBER 0579 - 0127

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
EQUINE INFECTIOUS ANEMIA LABORATORY TEST
(VS Memorandum 505, 16)

SERIAL NO.
S 1001133

1. ACCESSION NUMBER
H7 4656

2. DATE BLOOD DRAWN
2-8-2017

Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, Counties, and Telephone Numbers Will Not Be Processed.

3. REASON FOR TESTING

Market Change of Ownership Show First Test
 Retest Export

4. GEOGRAPHIC INFORMATION
SYSTEMS (GIS)
LAD
LONI

5. VETERINARY LICENSE
OR ACCREDITATION NO.
034466

6. TEST TYPE
 ELISA
 AGID

7. NAME AND ADDRESS OR STABLE/MARKET (Please print or type)
Olin & Sally Armstrong - Hidden Hollow
4 Hidden Lane
Staunton, Va
Zip Code 24401
County Augusta

8. NAME AND ADDRESS OF OWNER (Please print or type)
Elta Favers to Hidden Hollow
4 Hidden Lane
Staunton, Va
Zip Code 24401
County Augusta

9. NAME AND ADDRESS OF VETERINARIAN (Please print or type)
Donald B. Cromer DVM
15 Miss Phillips Rd.
Staunton, Va
Zip Code 24401
Tel No. 540-337-6200
County Augusta

I certify the specimen submitted with this Form was drawn by me from the horse described below on the date indicated above.

10. SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN
Donald B. Cromer DVM

11. TYPE OR PRINT SIGNATURE NAME
Donald B. Cromer DVM
12. SIGNATURE DATE
2-8-2017

I certify that I have examined this form and, to the best of my knowledge and belief, this form is true, correct and complete.

13. SIGNATURE OF OWNER OR OWNER'S AGENT

14. TYPE OR PRINT SIGNATURE NAME

16. Title No.	17. Official Tag No.	18. Tattoo/Brand	19. Name of Horse	20. Color	21. Breed	22. Equipment L.D. No.	23. Age or DOB	24. Sex	25. M - Male F - Female G - Gelding N - Neuter
			Don Alfredo	Chestnut	Hannoverian		01-07-12	5yr	G

SHOW ALL SIGNIFICANT MARKINGS, WHORLS, BRANDS, AND SCARS



1 - Coronet, 2 - Pastern, 3 - Fetlock, 4 - Knee, 5 - Hack

NARRATIVE DESCRIPTION AND REMARKS

26. HEAD Blaze, whorl	29. OTHER MARKS AND BRANDS
27. LEFT FORELEGS	28. RIGHT FORELEGS Pastern
29. LEFT HINDLEGS Stocking	30. RIGHT HINDLEGS Stocking

FOR LABORATORY USE ONLY

31. DATE RECEIVED 08/09/17	32. DATE REPORTED OUT	34. TEST RESULTS <input checked="" type="checkbox"/> Negative <input type="checkbox"/> Positive <input checked="" type="checkbox"/> AGID <input type="checkbox"/> ELISA
33. SIGNATURE OF TECHNICIAN [Signature]		35. REMARKS ④

Fabrication of this form or knowingly using a falsified form is a criminal offense and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (U.S.C. Section 1001).