

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

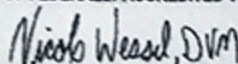
EIA-3821971

SERIAL NO. IL-3821971	LAB / ACCESSION NO. CHCG00256179	DATE SIGNED 2017-07-10	COUNTY McHenry
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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 Amber Bauman 51116 Mt. Thabor Rd. Woodstock IL 60098 Phone: 8157902151 PIN: NA / LID: NA	NAME & ADDRESS OF VETERINARIAN Cutting Edge Equine Veterinary Services Nicole M. Wessel DVM 9213 N. Clark Road Richmond, IL 60071 Phone: 815-675-1666	NAME & ADDRESS OF STABLE/MARKET Valley View Acres 51116 Mt. Thabor Rd. Woodstock IL 60098 Phone: 8154553520 PIN: NA / LID: NA
VETERINARY LICENSE OR ACCREDITATION NO. NAN: 036713	TEST TYPE AGID	REASON FOR TESTING Annual

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.

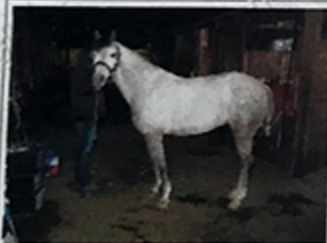
SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN  Nicole M. Wessel DVM 2017-07-10 1:46 PM -07:00	SIGNATURE NAME Nicole M. Wessel DVM	DATE BLOOD DRAWN 2017-07-10
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CERTIFICATION OF OWNER OR OWNER'S AGENT I certify that I have examined this form and, to the best of my knowledge and belief, this form is true, correct and complete.

SIGNATURE OF OWNER OR OWNER'S AGENT 	SIGNATURE NAME Amber Bauman	SIGNATURE DATE 2017-07-10
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NAME OF HORSE Two For The Bunny	ID1	ID2	ID3
COLOR Gray	AGE OR DOB 2007-01-01	BREED Welsh Pony	GENDER Female

REMARKS:



NARRATIVE DESCRIPTION:

HEAD: none

LEFT FORELIMB: sock

RIGHT FORELIMB: sock

LEFT HINDLIMB: sock

RIGHT HINDLIMB: sock

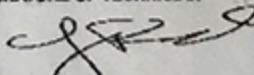
OTHER MARKS AND BRANDS

RABIES VACCINATION

TYPE	VACC. DATE	PRODUCT	SERIAL NUMBER	EXPIR. DATE	ADMINISTERED BY
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FOR LABORATORY USE ONLY

LABORATORY Antech Diagnostics, Inc. - Illinois 2601 W. 22nd Street Oakbrook IL 60523 800-745-4725	TUBE NO. 100347522-2	DATE RECEIVED 2017-07-11	DATE REPORTED 2017-07-12	TEST RESULTS Negative
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TECHNICIAN Linda Baillie	SIGNATURE OF TECHNICIAN  Linda Baillie 2017-07-12 7:14 AM -07:00
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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.

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