



GlobalVetLINK - EQUINE INFECT	IOUS ANEMIA LABORATOR	Y TEST		EIA-13331831			
This Equine Infectious Anemia (EIA)		,			all data fields as found on federa mbers Will Not Be Processed.	I form VS 10-11. Forms Without Adequat	
	TE SIGNED 18-03-29	LAB/ACCESSION N	LAB/ACCESSION NUMBER			COUNTY	
NAME & ADDRESS OF OWNER		NAME & ADDRESS	NAME & ADDRESS OF VETERINARIAN		NAME & ADDRESS OF STABLE/MARKET		
Drew Taylor 11083 Jacksontown Rd Somerset, VA 22972 Phone: 5406725099 PIN/LID: /		Keswick, VA 22947	6539 Gordonsville Rd		Drew Taylor 11083 Jacksontown Rd Somerset, VA 22972 Phone: 5406725099 PIN/LID: /		
/ETERINARY LICENSE OR ACC 301200199 - VA / 051149	TEST TYPE	TEST TYPE REASO Annual			ON FOR TESTING I		
ERTIFICATION OF FEDERALLY AC	CREDITED VETERINARIAN I cer	tify the specimen submitted	with this form was dra	wn by me from th	ne horse described below on the	e day indicated below.	
SIGNATURE OF FEDERALLY AC		SIGNATURE NAI Jeffrey Beshear D			DATE BLOOD DRAWN 2018-03-29		
CERTIFICATION OF OWNER OR OW	NER'S AGENT I certify that I have	e examined this form and, to	the best of my knowle	edge and belief, t	his form is true, correct and com	nplete	
SIGNATURE OF OWNER OR OW		SIGNATURE N Drew Taylor	AME	SIGNAT 2018-03	URE DATE -29		
	14		"Filt				
AME OF HORSE illy The Kid					ID3		
OLOR hestnut	AGE OR DOB 2014		BREED Welsh X			R ANDRON	
NARRATIVE DESCRIPTION:			2/10				
HEAD: Star, Stripe, Snip			OTHER MARKS AND BRANDS: /				
LEFT FORELIMB:			RIGHT FORELIMB:				
LEFT HINDLIMB:			RIGHT HINDLIMB: Sock				
ABIES VACCINATION							
	CCINATION DATE	PRODUCT	SERIAL NUMB	ER -	EXPIRATION DATE	ADMINISTERED BY	
OR LABORATORY USE ONLY ECHNICIAN	÷	TUBE NUMBER	DATE RECEIVI	ED.	DATE REPORTED	TEST RESULTS	
ECHNICIAN		101116199-1	DATE RECEIVE	=D	DATE REPORTED	TEST RESOLTS	
EST REMARKS	~10 ¹⁰		CNO.		~100	G _{lO} ,	
ABORATORY			SIGNATURE O	F TECHNICIAI	N Dillated in N		
		Mathlat	78	1/2	Taranga sengga	, weigh	

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