




GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST				EIA-13507465	
GlobalVetLINK's eEIA test form contains all data fields as found on federal form VS 10-11. Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, and Telephone Numbers Will Not Be Processed.					
SERIAL NUMBER EIA-13507465	DATE SIGNED 2018-05-10	LAB/ACCESSION NUMBER	COUNTY		
NAME & ADDRESS OF OWNER Ellen Baehr 10208 Applerock Dr O'Fallon, MO 63368 Phone: 3145810282 PIN/LID: /		NAME & ADDRESS OF VETERINARIAN Homestead Veterinary Hospital Mark Cassells DVM 105 Whispering Hope Dr. Villa Ridge, MO 63089 Phone: 636-451-4655		NAME & ADDRESS OF STABLE/MARKET Happenstance Farms 30296 N Stracks Church Rd Wright City, MO 63390 Phone: 314-581-0282 PIN/LID: /	
VETERINARY LICENSE OR ACCREDITATION NO. 2000163629 - MO / 030370		TEST TYPE		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			SIGNATURE NAME Mark Cassells DVM		DATE BLOOD DRAWN 2018-05-03
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 Ellen Baehr		SIGNATURE DATE 2018-05-10
NAME OF HORSE OFF THE RECORD / OLLIE		ID1 Microchip: 981020017186155	ID2	ID3	
COLOR Red Roan	AGE OR DOB 2013-01-01	BREED Welsh Pony		GENDER Neutered/Castrated Male	
					
NARRATIVE DESCRIPTION:					
HEAD: Star strip			OTHER MARKS AND BRANDS: Brand /		
LEFT FORELIMB: no white markings			RIGHT FORELIMB: no white markings		
LEFT HINDLIMB: Sock			RIGHT HINDLIMB: Sock		
RABIES VACCINATION					
TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY
FOR LABORATORY USE ONLY					
TECHNICIAN		TUBE NUMBER 101658256-0	DATE RECEIVED	DATE REPORTED	TEST RESULTS
TEST REMARKS					
LABORATORY			SIGNATURE OF TECHNICIAN		