

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-13656643	DATE SIGNED 2018-06-29	LAB/ACCESSION NUMBER 1806300604	COUNTY
NAME & ADDRESS OF OWNER Tayna Bowden 4493 NE Stevens-Uhler Rd Poulsbo, WA 98370 Phone: 360-632-7110 PIN/LID: /		NAME & ADDRESS OF VETERINARIAN Owens Equine Sarah Owens 9506 240th Ave NE Issaquah, WA 98027 Phone: 206-661-6005	
NAME & ADDRESS OF STABLE/MARKET Tayna Bowden 4493 NE Stevens-Uhler Rd Poulsbo, WA 98370 Phone: 360-632-7110 PIN/LID: /		NATIONAL ACCREDITATION NUMBER 028411	TEST TYPE AGID
REASON FOR TESTING Market			

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  Sarah Owens 2018-06-29 15:24:09 -05:00	DATE BLOOD DRAWN 2018-06-29
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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 Tayna Bowden	SIGNATURE DATE 2018-06-29
NAME OF HORSE Rhodia	ID1	ID2
COLOR Bay	AGE OR DOB 2009	BREED Oldenburg
		GENDER Female



NARRATIVE DESCRIPTION:	OTHER MARKS AND BRANDS: None
HEAD: small star	NECK AND BODY: none
LEFT FORELIMB: none	RIGHT FORELIMB: none
LEFT HINDLIMB: none	RIGHT HINDLIMB: none


RABIES VACCINATION

TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY
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FOR LABORATORY USE ONLY

TECHNICIAN Shannon Pedersen	TUBE NUMBER 101743377-0	DATE RECEIVED 2018-06-30	DATE REPORTED 2018-07-03	TEST RESULTS Negative
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TEST REMARKS

LABORATORY Phoenix Central Laboratory 4338 Harbour Pointe Blvd SW Mukilteo, WA 98275-5453	SIGNATURE OF TECHNICIAN  Shannon Pedersen 2018-07-03 13:14:37 -05:00
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