

Ohio Department of Agriculture  
 Division of Animal Industry  
 8995 E. Main Street  
 Reynoldsburg, Ohio 43068  
 614-728-6220

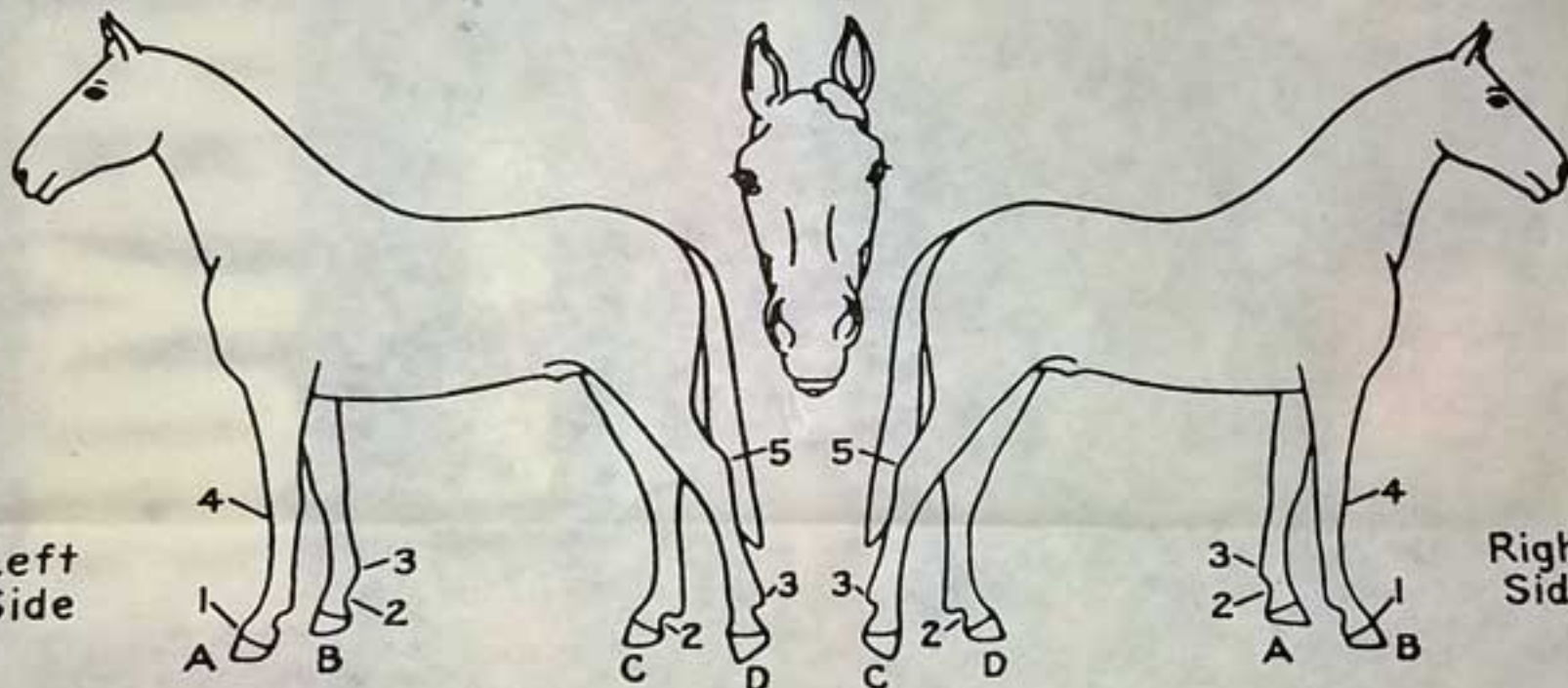
B1819985

**EQUINE INFECTIOUS ANEMIA TEST RECORD**

Print name and address legibly for window envelope use

License # 0115	Premises #	Owner David Blake	Address 35302 Co Rd 72	Premises #
Dr. Valerie Anderson	Address 1040 Mt. Zion Rd	City Fleming	State OH	Zip 43077
City Jackson	State Ohio	Zip 45040	Horse Stabled At Same	Address
I hereby certify that the blood specimen submitted with this form was drawn by me from the horse described below on the date indicated.		Market Test: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Auction Market Southern Ohio Horse Sale	Premises #
Date 9/8/18	Signature Valerie Anderson	Address Wandersons Arena Blvd 23	City Jackson	State Ohio
City Jackson	State Ohio	Zip 45040	Address	Premises #

TUBE NO.	NAME	OFFICIAL ID	TATTOO	REG. NO.	COLOR	BREED	SEX*	AGE
60	Skipper Delux Farm			488140	Chest	AGHA	M <input type="checkbox"/> F <input checked="" type="checkbox"/> MN <input type="checkbox"/>	12



Remarks	A-Left or near fore leg B-Right or off fore leg C-Right or off hind leg D-Left or near hind leg	1. Coronet 2. Pastern 3. Fetlock 4. Knee 5. Hock	Remarks
---------	--	--	---------

\*M-Male  
 F-Female  
 MN-Male Neutered  
 LAB USE ONLY  
 09122018

Lab.	By AB	Date	Test Result
------	----------	------	-------------

Remarks Lot 240	ELSHINEC	White - Office Green - Office Canary - Owner Pink - Veterinarian
--------------------	----------	---