

GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST					EIA-13336071	
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. Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, and Telephone Numbers Will Not Be Processed.						
SERIAL NUMBER EIA-13336071	DATE SIGNED 2018-03-30	LAB/ACCESSION NUMBER 180401-TAE-015	COUNTY Georgia			
NAME & ADDRESS OF OWNER Max & Denise Hirsch 404 Owen Store Rd Canton, GA 30115 Phone: 770-704-9190 PIN/LID: /		NAME & ADDRESS OF VETERINARIAN Jennifer Melcher 241 Allendale Drive Canton, GA 30115 Phone: 770-862-9166		NAME & ADDRESS OF STABLE/MARKET New Beginnings Stable 404 Owens Store Road Canton, GA 30115 Phone: 770-876-0288 PIN/LID: /		
VETERINARY LICENSE OR ACCREDITATION NO. 7282 - GA / 026662		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 <i>Jennifer M. Melcher, DVM</i> Jennifer M. Melcher DVM 2018-03-30 11:17:10 -05:00			SIGNATURE NAME Jennifer M. Melcher DVM		DATE BLOOD DRAWN 2018-03-29	
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 Max & Denise Hirsch		SIGNATURE DATE 2018-03-30	
NAME OF HORSE Dakota GK	ID1	ID2	ID3			
COLOR Bay	AGE OR DOB 2011-01-01	BREED Holsteiner	GENDER Female			
NARRATIVE DESCRIPTION:						
HEAD: Star, Strip, Snip			OTHER MARKS AND BRANDS: /			
LEFT FORELIMB: Lateral Heel Bulb			RIGHT FORELIMB: None			
LEFT HINDLIMB: Mid Cannon			RIGHT HINDLIMB: Fetlock			
RABIES VACCINATION						
TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY	
FOR LABORATORY USE ONLY						
TECHNICIAN Brooke K. Brun		TUBE NUMBER 101576000-0	DATE RECEIVED 2018-03-30	DATE REPORTED 2018-04-01	TEST RESULTS Negative	
TEST REMARKS						
LABORATORY Equus Coggins Lab 4813 Arbor Hill Rd Canton, GA 30115			SIGNATURE OF TECHNICIAN <i>Brooke K. Brun</i> Brooke K. Brun 2018-04-02 13:08:08 -05:00			

NOTICE TO DOCUMENT INSPECTORS. This official document was authorized in agreement with the state of animal origin, issuing veterinarian, via GlobalVetLINK.com
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