




GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST				EIA-14499638	
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-14499638	DATE SIGNED 2019-04-09	LAB/ACCESSION NUMBER MECH01720422	COUNTY		
NAME & ADDRESS OF OWNER		NAME & ADDRESS OF VETERINARIAN		NAME & ADDRESS OF STABLE/MARKET	
NATIONAL ACCREDITATION NUMBER 069075		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>Rebecca L. Bean DVM</i> Rebecca Bean DVM 2019-04-09 12:03:54 -05:00				DATE BLOOD DRAWN 2019-04-08	
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 Sally Lasso	SIGNATURE DATE 2019-04-09	
NAME OF HORSE Dea Valente	ID1 Barn Name: Val	ID2	ID3		
COLOR Black	AGE OR DOB 2009-04-09	BREED Westphalian (Westfalen)	GENDER Male		
					
NARRATIVE DESCRIPTION:			OTHER MARKS AND BRANDS: None		
HEAD: star, strip and snip			NECK AND BODY: None		
LEFT FORELIMB: None			RIGHT FORELIMB: pastern		
LEFT HINDLIMB: coronet			RIGHT HINDLIMB: None		
RABIES VACCINATION					
TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY
FOR LABORATORY USE ONLY					
TECHNICIAN Tennie Jones		TUBE NUMBER 102166217-0	DATE RECEIVED 2019-04-10	DATE REPORTED 2019-04-11	TEST RESULTS Negative
TEST REMARKS					
LABORATORY Anlech Test Express (Memphis/Southaven) 2433 Globe Cove Southaven, MS 38671			SIGNATURE OF TECHNICIAN <i>Tennie Jones</i> Tennie Jones 2019-04-11 08:35:09 -05:00		