

EIA-14080925



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GlobalVetLINK - EQUINE INF	ECTIOUS ANEMIA LA	BORATORY	TEST		EIA-14080925			
GlobalVetLINK's eEIA test for	m contains all data fields	as found on fee		Without Adequate Descriptions Of Th	e Horse and Complete	Addresses Including	Zip Codes, and Telephone	
SERIAL NUMBER SIA-14080925	DATE SIGNED 2018-12-18		LAB/ACCESSION NUMBER		COUNTY			
ME & ADDRESS OF OWNER			NAME & ADDRESS OF VETERINARIAN		NAME & ADDR	NAME & ADDRESS OF STABLE/MARKET		
Lara Wiley 2050 Bandy Ave Eldersburg, MD 21784 Phone: 410-693-2434 PIN/LID: /			Equine Practice, PC Michael J. Odian DVM 4250 Stumptown Rd Taneytown, MD 21787 Phone: 410-756-5007		Lara Wiley 2050 Bandy Av Eldersburg, MD	2050 Bandy Ave Eldersburg, MD 21784 Phone: 410-693-2434		
IATIONAL ACCREDITATION	NUMBER		TEST TYPE		REASON FOR	TESTING		
032552			- The		Annual	Annual		
CERTIFICATION OF FEDERALLY	ACCREDITED VETERI	NARIAN I certi	fy the specimen submitted wi	th this form was drawn by me from th	ne horse described below	v on the day indicate	d below.	
SIGNATURE OF FEDERALLY	ACCREDITED VETE	RINARIAN	Jo	CHODANAS	DATE BLOOD 2018-12-13	DRAWN	Clippaling	
CERTIFICATION OF OWNER OR	OWNER'S AGENT I cer	tify that I have	examined this form and, to th	e best of my knowledge and belief, the	his form is true, correct a	ind complete		
SIGNATURE OF OWNER OR OWNER'S AGENT				SIGNATURE NAME Lara Wiley		SIGNATURE DAT 2018-12-18	E	
_	14		.1-	1			a a	
NAME OF HORSE Daxton	ID	1		ID2		ID3		
COLOR Chestnut		SE OR DOB /28/16		BREED Oldenburg Cross	7900	GENDER Male	CIO _{LOS}	
		a de la constante de la consta		Cholody of Link			A South Water	
NARRATIVE DESCRIPTION:	see photos	O.		OTHER MARKS AND BRA	NDS: None		O.	
HEAD: None				NECK AND BODY: None				
EFT FORELIMB: None				RIGHT FORELIMB: None				
EFT HINDLIMB: None	1		.J-	RIGHT HINDLIMB: None		×		
RABIES VACCINATION			1/6	· [24]		16		
TYPE	VACCINATION DATE	E .s	PRODUCT	SERIAL NUMBER	EXPIRATION [ATE A	OMINISTERED BY	
FOR LABORATORY USE ON	LY							
TECHNICIAN		Clo.	TUBE NUMBER 101407762-1	DATE RECEIVED	DATE REPOR	TED TI	EST RESULTS	
EST REMARKS						,		
·	160.		16-9.	169.		10/2	<u></u>	
LABORATORY	77),	<	Asilli.	SIGNATURE OF TECHNIC	CIAN	J.	alos l	

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