



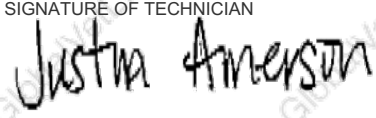


GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST				EIA-14151075	
GlobalVetLINK's eEIA test form contains all data fields as found on federal form VS 10-11. Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, and Telephone Numbers Will Not Be Processed.					
SERIAL NUMBER EIA-14151075	DATE SIGNED 2019-01-14	LAB/ACCESSION NUMBER ATCH00474857	COUNTY		
NAME & ADDRESS OF OWNER Eliza Hay 3530 Bohicket Rd. Johns Island, SC 29455 Phone: (843) 670-2459 PIN/LID: /		NAME & ADDRESS OF VETERINARIAN Island Equine Clinic Katherine Loewenstine 7796 White Point Rd Yonges Island, SC 29449 Phone: 843-889-1316		NAME & ADDRESS OF STABLE/MARKET River's Edge Farm 1136 Bees Ferry Rd. Johns Island, SC 29455 Phone: (843) 670-2459 PIN/LID: /	
NATIONAL ACCREDITATION NUMBER 080117		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  Katherine Loewenstine 2019-01-14 12:02:30 -06:00				DATE BLOOD DRAWN 2019-01-11	
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 Eliza Hay		SIGNATURE DATE 2019-01-14
NAME OF HORSE Aloha "Rosie"	ID1	ID2	ID3		
COLOR Chestnut	AGE OR DOB 8 years	BREED Pony/Warmblood Cross	GENDER Mare		
					
NARRATIVE DESCRIPTION:			OTHER MARKS AND BRANDS: None / None		
HEAD: Blaze			NECK AND BODY: None		
LEFT FORELIMB: Coronet			RIGHT FORELIMB: Stocking		
LEFT HINDLIMB: Stocking			RIGHT HINDLIMB: Stocking		
RABIES VACCINATION					
TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY
FOR LABORATORY USE ONLY					
TECHNICIAN Justin Amerson		TUBE NUMBER 101996125-0	DATE RECEIVED 2019-01-14	DATE REPORTED 2019-01-16	TEST RESULTS Negative
TEST REMARKS					
LABORATORY Antech Diagnostics, Inc. - Atlanta 4895 S. Atlanta Rd Smyrna, GA 30080			SIGNATURE OF TECHNICIAN  Justin Amerson 2019-01-17 06:26:11 -06:00		