



EIA-14748319



GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST				EIA-14748319	
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-14748319	DATE SIGNED 2019-06-03	LAB/ACCESSION NUMBER NYCH01467445	COUNTY		
NAME & ADDRESS OF OWNER Harmoni VanEtten P.O. Box 89 Thompson Ridge, NY 10985 Phone: 845-866-8200 PIN/LID: /		NAME & ADDRESS OF VETERINARIAN Mid Hudson Equine Of Highland Sandra Fatone DVM 117 Crow Hill Rd Highland, NY 12528 Phone: (845) 649-0485		NAME & ADDRESS OF STABLE/MARKET Justin Farms 100 Schmidt Lane Circleville, NY 10919 Phone: 845-361-5038 PIN/LID: /	
NATIONAL ACCREDITATION NUMBER 014540		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>Sandra Fatone</i> Sandra Fatone DVM 2019-06-03 09:03:54 -05:00				DATE BLOOD DRAWN 2019-05-30	
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 Harmoni VanEtten	SIGNATURE DATE 2019-06-03	
NAME OF HORSE Haymars Heathen	ID1 Barn Name: Rudy	ID2	ID3		
COLOR Bay	AGE OR DOB 2012-01-01	BREED Welsh X	GENDER Gelding		
					
NARRATIVE DESCRIPTION:			OTHER MARKS AND BRANDS: None		
HEAD: star, snip			NECK AND BODY: None		
LEFT FORELIMB: pastern			RIGHT FORELIMB: none		
LEFT HINDLIMB: sock			RIGHT HINDLIMB: none		
RABIES VACCINATION					
TYPE Booster	VACCINATION DATE 2019-05-30	PRODUCT Imrab LA (Large Animal)	SERIAL NUMBER 14088	EXPIRATION DATE 2020-05-29	ADMINISTERED BY Dr. Sandra Fatone
FOR LABORATORY USE ONLY					
TECHNICIAN Dwight Combs		TUBE NUMBER 101071426-4	DATE RECEIVED 2019-06-03	DATE REPORTED 2019-06-05	TEST RESULTS Negative
TEST REMARKS					
LABORATORY Antech Diagnostics, Inc. - New York 1111 Marcus Avenue Lake Success, NY 11042			SIGNATURE OF TECHNICIAN <i>Dwight Combs</i> Dwight Combs 2019-06-05 11:17:13 -05:00		

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