

GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST EIA-15318973

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-15318973	DATE SIGNED 2019-12-03	LAB/ACCESSION NUMBER MECH02177145	COUNTY
NAME & ADDRESS OF OWNER Oksana Williams 14929 Bellamy Mill Road Whitakers, NC 27891 Phone: 2524696116 PIN/LID: /		NAME & ADDRESS OF VETERINARIAN NC Mobile Veterinary Service Oberlin McDaniel DVM 12612 NC Hwy 48 Whitakers, NC 27891 Phone: 919-770-1744	NAME & ADDRESS OF STABLE/MARKET Oksana Williams 14929 Bellamy Mill Road Whitakers, NC 27891 Phone: 2524696116 PIN/LID: /
NATIONAL ACCREDITATION NUMBER 082695	TEST TYPE AGID	REASON FOR TESTING Within state use / 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>Oberlin McDaniel</i> Oberlin McDaniel DVM 2019-12-03 15:49:05 -06:00	DATE BLOOD DRAWN 2019-12-02
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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 Oksana Williams	SIGNATURE DATE 2019-12-03
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NAME OF HORSE Lisa	ID1	ID2	ID3
COLOR Chestnut	AGE OR DOB 2011-05-05	BREED Lipizzaner x Warmblood	GENDER Female



NARRATIVE DESCRIPTION:	OTHER MARKS AND BRANDS: None
HEAD: Stripe	NECK AND BODY: None
LEFT FORELIMB: None	RIGHT FORELIMB: None
LEFT HINDLIMB: Sock	RIGHT HINDLIMB: None

RABIES VACCINATION

TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY
FOR LABORATORY USE ONLY					
TECHNICIAN Tonnie Jones	TUBE NUMBER 101649519-1	DATE RECEIVED 2019-12-07	DATE REPORTED 2019-12-09	TEST RESULTS Negative	

TEST REMARKS

LABORATORY Antech Test Express (Memphis/Southaven) 2433 Globe Cove Southaven, MS 38671	SIGNATURE OF TECHNICIAN <i>Tonnie Jones</i> Tonnie Jones 2019-12-09 08:51:20 -06:00
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