FORM SERIAL NUMBER EIA-16239088



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GVL - EQUINE INFECTIOUS ANEMIA LABORATORY TO	ST					
1. LAB/ACCESSION NUMBER V20-23970	2. DATE BLOG 2020-09-01	DD DRAWN	3. TEST REQUESTED BY VET ELISA		4. REASON FOR TESTING Interstate movement	
5. CURRENT HOME PREMISES OF EQUINE: RANCH / FARM / STABLE / MARKET Rancho Corazon 828 Hwy 408 Lemitar, NM 87823 Phone: 5758351845 PIN/LID: /		7. NAME & ADDRESS OF OWNER Rancho Corazon 828 Hwy 408 Lemitar, NM 87823 Phone: 5758351845 PIN/LID: /		8. NAME & ADDRESS OF VETERINARIAN Thal Equine Douglas Thal DVM 69 Bonanza Creek Road Santa Fe, NM 87508 Phone: (505) 438-6590		
6. COUNTY OF CURRENT HOME PREMISES OF EQUINE SANTA FE		l l		VETERINA 049850	TERINARIAN NATIONAL ACCREDITATION NUMBER 9850	
CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN I certify I am a category II federally accredited veterinarian, authorized, in the state where the sample was obtained, by me, from the animal described below.						
SIGNATURE OF FEDERALLY ACCREDITED VETERINA	RIAN				12	

Douglas Thal DVM 2020-09-01 16:31:51 -05:00

RSE					
9. TUBE NUMBER 103125344-0	10. TAG/TATTOO/BRAND NUMBER None	11. REGISTERED NAME Django RC	12. COLOR / COAT OR HAIR COLOR(S) Bay		
13. BREED OR SPECIES Holsteiner			16. MICROCHIP, BREED, OR REGISTRATION NUMBER None		







A STATE OF THE STA	TENE						
NARRATIVE DESCRIPTION:	N (3)			OTHER MARKS AND BRANDS: No marking / Holsteiner brand on left hip			
17. HEAD: No marking			18. NECK AND BODY:	18. NECK AND BODY: No marking			
19. LEFT FORELIMB: Sock	20. RIGHT FORELIMB:	20. RIGHT FORELIMB: Coronet					
21. LEFT HINDLIMB: Sock	22. RIGHT HINDLIMB:	22. RIGHT HINDLIMB: Sock					
RABIES VACCINATION							
TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY		
FOR LABORATORY USE ONLY							
22 LADODATODY	24 DATE CAMPLE DECE	11/ED 25 D	ATE DECLILE DEDODTED	26 OFFICIAL DECLILE	27 TEST TYPE USED -		

	TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY
	FOR LABORATORY USE ONLY					
23. LABORATORY NMDA/Veterinary Diagnostic Services 1101 Camino de Salud, NE 1101 Camino de Salud NE	24. DATE SAMPLE RECE 2020-09-03 28. LABORATORY REMA	2020-09-	RESULTS REPORTED 03	26. OFFICIAL RESULT Negative	27. TEST TYPE USED ELISA	
	Albuquerque, NM 87102					

Phone: 505-383-9299

29. SIGNATURE OF NVSL APPROVED EIA TECHNICIAN

Gary Oty

2020-09-03 12:44:18 -05:00

30. INTERIM RESULT REFERRED FOR CONFIRMATION

No

Official EIA Test Form, Approved by USDA Veterinary Services March 2020, GVL