


FORM SERIAL NUMBER
EIA-16202353



GVL - EQUINE INFECTIOUS ANEMIA LABORATORY TEST					
1. LAB/ACCESSION NUMBER		2. DATE BLOOD DRAWN 2020-08-11		3. TEST REQUESTED BY VET	
4. REASON FOR TESTING coggings		5. CURRENT HOME PREMISES OF EQUINE: RANCH / FARM / STABLE / MARKET Robbi Scott 11472 NS 3520 RD earlsboro, OK 74840 Phone: 405-788-5620 PIN/LID: /		7. NAME & ADDRESS OF OWNER Robbi Scott 11472 NS 3520 RD earlsboro, OK 74840 Phone: 405-788-5620 PIN/LID: /	
6. COUNTY OF CURRENT HOME PREMISES OF EQUINE pottawatamie		8. NAME & ADDRESS OF VETERINARIAN Morphis Veterinary Services Laura Morphis DVM 12538 SH-99 Seminole, OK 74868 Phone: 405-382-7777		VETERINARIAN NATIONAL ACCREDITATION NUMBER 053999	
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 VETERINARIAN  Laura Morphis DVM 2020-08-19 12:17:02 -05:00					
HORSE					
9. TUBE NUMBER 103101044-0		10. TAG/TATTOO/BRAND NUMBER None		11. REGISTERED NAME Phireball	
12. COLOR / COAT OR HAIR COLOR(S) Sorrel		13. BREED OR SPECIES Dutch Warmblood		14. AGE OR DOB 2020-04-02	
15. GENDER Stallion		16. MICROCHIP, BREED, OR REGISTRATION NUMBER None		17. HEAD: Blaze	
18. NECK AND BODY: No marking		19. LEFT FORELIMB: Stocking		20. RIGHT FORELIMB: Stocking	
21. LEFT HINDLIMB: High stocking		22. RIGHT HINDLIMB: Pastern		23. LABORATORY	
24. DATE SAMPLE RECEIVED		25. DATE RESULTS REPORTED		26. OFFICIAL RESULT	
27. TEST TYPE USED		28. LABORATORY REMARKS			
29. SIGNATURE OF NVSL APPROVED EIA TECHNICIAN			30. INTERIM RESULT REFERRED FOR CONFIRMATION		

