

GVL - EQUINE INFECTIOUS ANEMIA LABORATORY TEST					
FORM SERIAL NUMBER EIA-15711004	DATE BLOOD DRAWN 2020-03-24	LAB/ACCESSION NUMBER	COUNTY OF CURRENT HOME PREMISES OF EQUINE		
NAME & ADDRESS OF OWNER Hannah Reppert 544 Valencia Road Mars, PA 16046 Phone: (703) 475-3864 PIN/LID: /		NAME & ADDRESS OF VETERINARIAN Allegheny Equine Associates Alexis Baney DVM 5015 Sampson Ln Murrysville, PA 15668 Phone: 724-325-4615			
VETERINARIAN NATIONAL ACCREDITATION NUMBER 072388		TEST REQUESTED BY VET	CURRENT HOME PREMISES OF EQUINE: RANCH / FARM / STABLE / MARKET Breezewood Equestrian 544 Valencia Road Mars, PA 16046 Phone: 5555555555 PIN/LID: /		
REASON FOR TESTING Annual		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  Alexis Baney DVM 2020-03-27 00:08:48 -05:00		SIGNATURE DATE 2020-03-27			
HORSE					
NAME OF ANIMAL Sterling Lass	TUBE NUMBER 102813249-1	BARN NAME Cici	ID 2 No ID		
COLOR / COAT OR HAIR COLOR(S) Dark Bay	AGE OR DOB 2012-05-01	BREED OR SPECIES Thoroughbred	GENDER Mare		
					
NARRATIVE DESCRIPTION:		OTHER MARKS AND BRANDS: None specified			
HEAD: Star		NECK AND BODY: None specified			
LEFT FORELIMB: None		RIGHT FORELIMB: None			
LEFT HINDLIMB: None		RIGHT HINDLIMB: White on heel bulbs and along coronet band			
RABIES VACCINATION					
TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY
FOR LABORATORY USE ONLY					
TECHNICIAN		DATE SAMPLE RECEIVED	DATE RESULTS REPORTED	OFFICIAL RESULTS	
LABORATORY REMARKS				TEST TYPE USED	
				INTERIM RESULT REFERRED FOR CONFIRMATION	
LABORATORY			SIGNATURE OF NVSL APPROVED EIA TECHNICIAN		