FORM SERIAL NUMBER EIA-20864897

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| | , July F | ORM SERI EIA-20 | AL NUMBER 864897 | | S GVL |
|---|--|--|-------------------------------------|---|-----------------------------|
| 39/ 39/ | 39/ | 3% | .2 ⁹ / .2 ⁹ / | 39/ | |
| GVL - EQUINE INFECTIOUS ANEMIA LABO | | | | | |
| 1. LAB/ACCESSION NUMBER | 2. DATE BLO 2023-09-27 | 2. DATE BLOOD DRAWN 2023-09-27 | | BY VET 4. REASON F Within state u | FOR TESTING use / annual |
| 5. CURRENT HOME PREMISES OF EQUINE MARKET | : RANCH / FARM / STABLE / | 7. NAME & ADD | RESS OF OWNER | 8. NAME & ADDRESS OF | VETERINARIAN |
| Equestrian Resolutions 19529 US 79 N Jacksonville, TX 75766 Phone: 732-500-7825 PIN/LID: / 6. COUNTY OF CURRENT HOME PREMISES OF EQUINE Cherokee | | Equestrian Resc 19529 US 79 N Jacksonville, TX Phone: 732-500 PIN/LID: / | 75766 | 5H Equine Veterinary Services JAMES S. Handlin DVM 11008 County Road 2127 N Henderson, TX 75652 Phone: 8177576022 | |
| | | | | VETERINARIAN NATIONAL ACCREDITATION NUMBER 006031 | |
| CERTIFICATION OF FEDERALLY ACCREDIT I certify I am a category II federally accredited | | e state where the sa | ample was obtained, by me | e, from the animal described | below. |
| SIGNATURE OF FEDERALLY ACCREDITED | VETERINARIAN JAMES S. Handlin DV 2023-09-28 09:06:15 | | Salverlint Salve | sunt opposite | oraveling oraveling |
| HORSE | | | | | |
| 9. TUBE NUMBER 106405202-0 | 10. TAG/TAT NUMBER None | TOO/BRAND | 11. REGISTERED NAM Heritage | IE 12. COLOR / Grey | COAT OR HAIR COLOR(S) |
| 13. BREED OR SPECIES Quarter Horse | 14. AGE OR I 2017-01-27 | DOB | 15. GENDER Mare | 16. MICROCI NUMBER None | HIP, BREED, OR REGISTRATION |
| | | | astrettink Stonette | | |
| NARRATIVE DESCRIPTION: None | | | OTHER MARKS AND BRANDS: No marking | | |
| 17. HEAD: Whorl | N- | X | 18. NECK AND BODY: No marking | | |
| 19. LEFT FORELIMB: No marking | and the | 20. RIGHT FORELIMB: No marking | | | |
| 21. LEFT HINDLIMB: Sock | | | 22. RIGHT HINDLIMB: No marking | | |
| RABIES VACCINATION | | | | 0.076 | |
| ТҮРЕ | VACCINATION DATE | PRODUCT | SERIAL NUMBER | EXPIRATION DATE | ADMINISTERED BY |
| FOR LABORATORY USE ONLY | | | | | |
| 23. LABORATORY | 24. DATE SAMPLE REC 28. LABORATORY REM | | E RESULTS REPORTED | 26. OFFICIAL RESULT | 27. TEST TYPE USED |
| the set of set of the | Netlint | Netlink | Nething Ne | ent seint | stering stering |
| 29. SIGNATURE OF NVSL APPROVED EIA T | ECHNICIAN | N. CIO | 30. INTERIM RESULT F | REFERRED FOR CONFIRM | ATION |
| Official EIA Test Form, Approved by USDA Vete | erinary Services March 2020, | GVL | Salvertill Coolerive | Stapping and a start | Gobelle Gobelletin |