




This Equine Infectious Anemia (EIA) test was processed by an NVSL Accredited Laboratory —GlobalVetLink's eEIA test form contains all data fields as found on federal form VS 10-11

GlobalVetLink - EQUINE INFECTIOUS ANEMIA LABORATORY TEST				EIA-609620	
SERIAL NO. MI-609620		ACCESSION NO. ABC5555		DATE COMMITTED 4/10/09	
COUNTY					
Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, and Telephone Numbers Will Not Be Processed.					
NAME & ADDRESS OF OWNER Sample Owner 123 Lane Sample City, MI 12345 555-555-5555 Premises ID: 12345678		NAME & ADDRESS OF VETERINARIAN GlobalVetlink, LC 3 Demo Vet, DVM 2625 N. Loop Dr. Sample City, MI 11111 555-555-5555		NAME & ADDRESS OF STABLE/MARKET Sample Owner 123 Lane Sample City, MI 12345 555-555-5555 Premises ID: 12345678	
VETERINARY LICENSE OR ACCREDITATION NO. 1234 / MI:1234		TEST TYPE ELISA		REASON FOR TESTING 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 above.					
SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN			SIGNATURE NAME Demo Vet, DVM		DATE BLOOD DRAWN 4/9/09
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 Sample Owner		SIGNATURE DATE 4/10/09
NAME OF HORSE Sample Horse	Barn Name Horse	Breed Registration 123456		ID3 N/A	
COLOR Sorrel/ Overo	AGE OR DOB January 1, 2002	BREED Paint	GENDER Stallion		
REMARKS: Loud overo markings with flaxen mane and tail.					
					
NARRATIVE DESCRIPTION (See animal photograph(s) above)					
HEAD Bald face			OTHER MARKS AND BRANDS		
LEFT FORELIMB Stocking			RIGHT FORELIMB Solid		
LEFT HINDLIMB Stocking			RIGHT HINDLIMB Stocking		
FOR LABORATORY USE ONLY					
LABORATORY SystemTesting Only PO Box 4536 Sample City, Iowa 50010 515-296-0860		TUBE NO. 603605-2	DATE RECEIVED 4/10/09	DATE REPORTED 4/10/09	TEST RESULTS Negative
TECHNICIAN Kaylen Henry			SIGNATURE OF TECHNICIAN		
NOTICE TO DOCUMENT INSPECTORS. This official document was authorized in agreement with the state of animal origin, issuing veterinarian, via GlobalVetLink.com Please address any questions related to this document with your state or issuing state veterinarian's office.					