

FORM SERIAL NUMBER
EIA-18924227



GVL - EQUINE INFECTIOUS ANEMIA LABORATORY TEST

1. LAB/ACCESSION NUMBER	2. DATE BLOOD DRAWN 2022-07-18	3. TEST REQUESTED BY VET	4. REASON FOR TESTING Annual
5. CURRENT HOME PREMISES OF EQUINE: RANCH / FARM / STABLE / MARKET Nelson's Ranch 7273 Crosby Lake Rd Davisburg, MI 48350 Phone: 248-625-1595 PIN/LID: /	7. NAME & ADDRESS OF OWNER Jonathan LaVallis 181 Carr St Pontiac, MI 48342 Phone: 313-702-0034 PIN/LID: /	8. NAME & ADDRESS OF VETERINARIAN Hadley Hill Equine Clinic Roya A. Oliai-Stawicki 1344 South Hadley Road Ortonville, MI 48462 Phone: 248-627-2815	
6. COUNTY OF CURRENT HOME PREMISES OF EQUINE Oakland	VETERINARIAN NATIONAL ACCREDITATION NUMBER 088950		

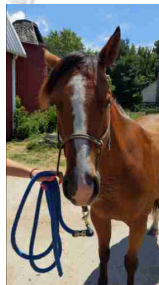
CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN
I certify I am a category II federally accredited veterinarian, authorized, in the state where the sample was obtained, by me, from the animal described below.

SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN

 **Roya A. Oliai-Stawicki**
2022-07-19 09:29:37 -05:00

HORSE

9. TUBE NUMBER 104938296-0	10. TAG/TATTOO/BRAND NUMBER None	11. REGISTERED NAME (BARN NAME) Splashin Olena (Ember)	12. COLOR / COAT OR HAIR COLOR(S) Bay
13. BREED OR SPECIES Quarter Horse	14. AGE OR DOB 2017-05-07	15. GENDER Mare	16. MICROCHIP, BREED, OR REGISTRATION NUMBER None



NARRATIVE DESCRIPTION: MW@EL

OTHER MARKS AND BRANDS: No marking

17. HEAD: Star, strip, snip, lower lip

18. NECK AND BODY: No marking

19. LEFT FORELIMB: Pastern W/ Ermine spots

20. RIGHT FORELIMB: No marking

21. LEFT HINDLIMB: Sock

22. RIGHT HINDLIMB: Sock W/ Ermine spots

RABIES VACCINATION

TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY
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FOR LABORATORY USE ONLY

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	