





GVL - EQUINE INFECTIOUS ANEMIA LABORATORY TEST					
1. LAB/ACCESSION NUMBER		2. DATE BLOOD DRAWN 2020-11-09		3. TEST REQUESTED BY VET	4. REASON FOR TESTING annual
5. CURRENT HOME PREMISES OF EQUINE: RANCH / FARM / STABLE / MARKET Janssen Performance Horses 49025 Government Road Rush City, MN 55069 Phone: 612-269-0696 PIN/LID: /		7. NAME & ADDRESS OF OWNER Janssen Performance Horses 49025 Government Road Rush City, MN 55069 Phone: 612-269-0696 PIN/LID: /		8. NAME & ADDRESS OF VETERINARIAN Weitz Equine Veterinary Services Dr. Paul Weitz 5224 124th Ct. East Northfield, MN 55057 Phone: 507-301-3400	
6. COUNTY OF CURRENT HOME PREMISES OF EQUINE Chisago County		VETERINARIAN NATIONAL ACCREDITATION NUMBER 006731			
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  Dr. Paul Weitz 2020-11-09 15:24:38 -06:00					
HORSE					
9. TUBE NUMBER 103260041-1		10. TAG/TATTOO/BRAND NUMBER None	11. REGISTERED NAME Spanky	12. COLOR / COAT OR HAIR COLOR(S) Sorrel	
13. BREED OR SPECIES Quarter Pony		14. AGE OR DOB 2015-11-09	15. GENDER Gelding	16. MICROCHIP, BREED, OR REGISTRATION NUMBER None	
					
NARRATIVE DESCRIPTION:			OTHER MARKS AND BRANDS: brand left hip		
17. HEAD: Blaze			18. NECK AND BODY: No marking		
19. LEFT FORELIMB: No marking			20. RIGHT FORELIMB: No marking		
21. LEFT HINDLIMB: Stocking			22. RIGHT HINDLIMB: No marking		
RABIES VACCINATION					
TYPE	VACCINATION DATE	PRODUCT	SERIAL NUMBER	EXPIRATION DATE	ADMINISTERED BY
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		