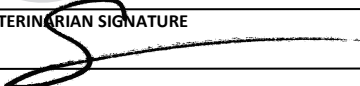


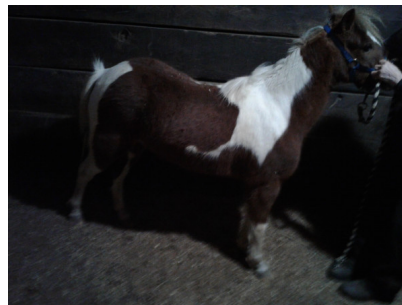
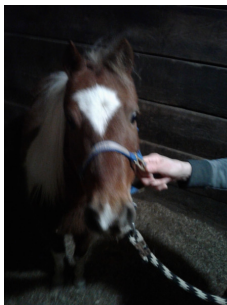
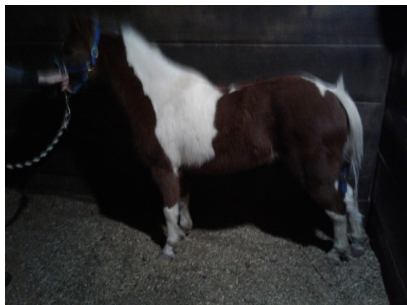
Larch Hill Laboratory LLC
Is an APHIS Approved EIA Testing Laboratory
EQUINE INFECTIOUS ANEMIA TEST FORM

FORM SERIAL NUMBER
605217LH

COMPLETION OF ALL UNSHADED NUMBERED FIELDS IS REQUIRED FOR SUBMISSION, IF NONE WRITE "NONE" AND TYPE OR PRINT LEGIBLY


1. LABORATORY ACCESSION NUMBER (for laboratory use only) 704173		2. DATE BLOOD DRAWN 03/19/2024		3. TEST REQUESTED BY VETERINARIAN <input type="checkbox"/> ELISA <input checked="" type="checkbox"/> AGID			
4. REASON FOR TESTING <input type="checkbox"/> Interstate Movement <input checked="" type="checkbox"/> Within State Use/Annual <input type="checkbox"/> Change Ownership/Sale <input type="checkbox"/> International Import/Export <input type="checkbox"/> Illness/Clinical Suspect <input type="checkbox"/> Investigation/Exposure							
5. CURRENT HOME PREMISES OF EQUINE: ranch/farm/stable/market			7. NAME AND ADDRESS OF OWNER				
5a. NAME Jackie Rodosawicz			7a. NAME Amy Wertenberger				
5b. PHYSICAL STREET ADDRESS 1527 Bramble Highway			7b. MAILING ADDRESS 13072 Armstrong Road				
5c. CITY, STATE, ZIP CODE Tecumseh, MI 492869742			7c. CITY, STATE, ZIP CODE S. Rockwood, MI 48179				
5d. PHONE NUMBER (517)423-5450		6. HOME PREMISES COUNTY Lenawee		7d. PHONE NUMBER (517)423-0717			
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.							
8. ACCREDITED VETERINARIAN							
8a. VETERINARIAN NAME Nathan Zael, DVM, PLC		8b. NATIONAL ACCREDITATION NUMBER 061502		8c. VETERINARIAN SIGNATURE 		8d. SIGNATURE DATE 03/19/2024	
8e. PHYSICAL/STREET ADDRESS OF VETERINARIAN 395 W. Delhi Road			8f. CITY, STATE, ZIP CODE Ann Arbor, MI 48103		8g. TELEPHONE NUMBER (734)994-7899		
9. Tube Number	10. Tag/Tattoo/Brand Number	11. Name of Animal	12. Color	13. Breed (or species if not a horse)	14. Age of DOB	15. Sex	
28	None	SW Don't Ask Just Watch aka Link	Bay/White Paint	Miniature Horse	03/09/2017	G	
16. MICROCHIP, BREED, OR REGISTRATION NUMBER 338694B							

SHOW ALL PERMANENT WHITE MARKINGS, BRANDS, TATTOOS, SCARS, AND WHORLS (marked with an "X")



1 - Coronet, 2 - Pastern, 3 - Fetlock, 4 - Carpus, 5 - Hock

REQUIRED: NARRATIVE DESCRIPTION OF PERMANENT WHITE MARKINGS, BRANDS, TATTOOS, SCARS, AND WHORLS. (If none write none) Suggested nomenclature includes Heel, Heels, Coronet(1); Half Pastern, Pastern(2); Fetlock(3); Half Canon, Canon, Carpus/Hock(4/5) above Carpus/Hock

17. HEAD Star/Snip		18. NECK AND BODY (include coat color patterns, if any) None	
19. LEFT FORELIMB Stocking		20. RIGHT FORELIMB Stocking	
21. LEFT HINDLIMB Sock		22. RIGHT HINDLIMB Stocking	
FOR LABORATORY USE ONLY			
23. EIA LABORATORY NAME Larch Hill Laboratory		24. DATE SAMPLE RECEIVED 03/22/2024	25. DATE RESULTS REPORTED 03/23/2024
23a. CITY Earlville		26. OFFICIAL TEST RESULT <input checked="" type="checkbox"/> Negative <input type="checkbox"/> Positive	
23b. STATE New York		27. TEST TYPE USED <input checked="" type="checkbox"/> AGID <input type="checkbox"/> ELISA	
28. LABORATORY REMARKS		29. SIGNATURE OF NVSL - APPROVED EIA TECHNICIAN 	
		30. INTERIM RESULT REFERRED FOR CONFIRMATION <input type="checkbox"/>	