

U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE EQUINE INFECTIOUS ANEMIA LABORATORY TEST (VS Memorandum 555.16)	SERIAL NO. G 1066299	1. ACCESSION NUMBER 023039	2. DATE BLOOD DRAWN 8-27-04
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Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, Counties, and Telephone Numbers Will Not Be Processed.

3. REASON FOR TESTING <input type="checkbox"/> Market <input type="checkbox"/> Change of Ownership <input checked="" type="checkbox"/> Retest <input type="checkbox"/> Show <input type="checkbox"/> First Test <input type="checkbox"/> Export		7. NAME AND ADDRESS OR STABLE/MARKET (Please print or type)	
4. GEOGRAPHIC INFORMATION SYSTEMS (GIS) LAT: LONG:		5. VETERINARY LICENSE OR ACCREDITATION NO. VM 4323	
		6. TEST TYPE <input type="checkbox"/> ELISA <input checked="" type="checkbox"/> AGID	
8. NAME AND ADDRESS OF OWNER (Please print or type) Nick Apostle 5755 SW Ranchito St. Palm City, FL 34990		9. NAME AND ADDRESS OF VETERINARIAN (Please print or type) B. A. Greene DVM 12012 SW Pineapple Ct. Palm City, FL 34990	
Tel No. County Martin		Tel No. 772 283 2551 County Martin	

CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN

I certify the specimen submitted with this Form was drawn by me from the horse described below on the date indicated above.

10. SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN 	11. TYPE OR PRINT SIGNATURE NAME B. A. Greene	12. SIGNATURE DATE 8-27-04
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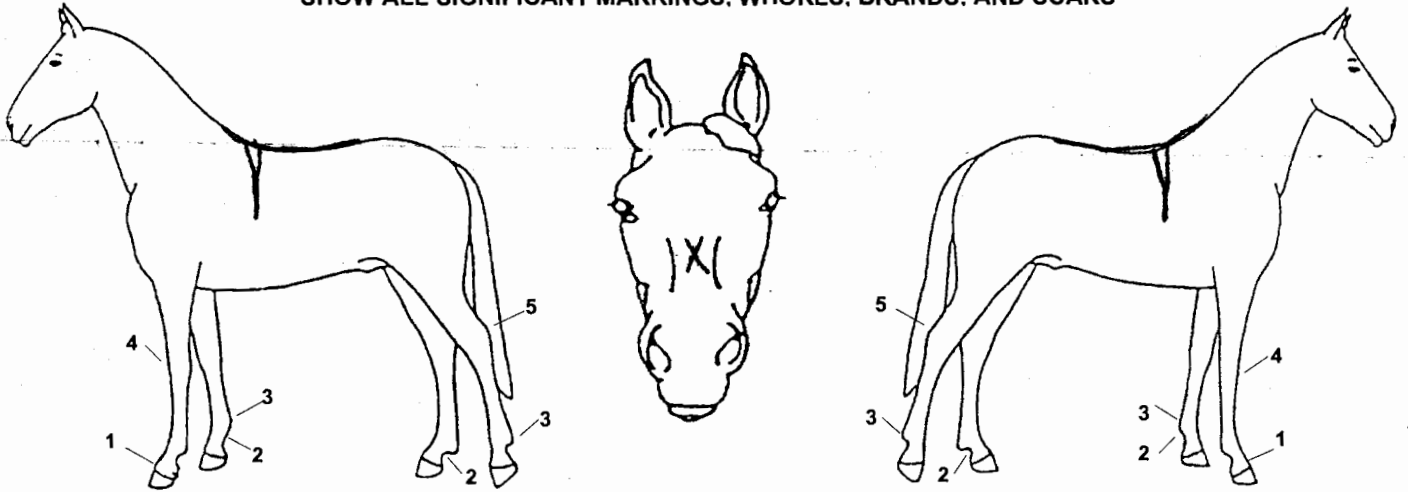
CERTIFICATION OF OWNER OR OWNER'S AGENT

I certify that I have examined this form and, to the best of my knowledge and belief, this form is true, correct and complete.

13. SIGNATURE OF OWNER OR OWNER'S AGENT Nick Apostle	14. TYPE OR PRINT SIGNATURE NAME	15. SIGNATURE DATE 8-27-04
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16. Tube No.	17. Official Tag No.	18. Tattoo/Brand	19. Name of Horse	20. Color	21. Breed	22. Electronic I.D. No.	23. Age or DOB	24. Sex	M - Male F - Female G - Gelding N - Neuter
19			Ozzie Moe	Grullo	Mini Sicilian Donkey		5	G	

SHOW ALL SIGNIFICANT MARKINGS, WHORLS, BRANDS, AND SCARS



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

NARRATIVE DESCRIPTION AND REMARKS

25. HEAD Whorl.	26. OTHER MARKS AND BRANDS Cross at withers.
27. LEFT FORELIMB	28. RIGHT FORELIMB
29. LEFT HINDLIMB 083004	30. RIGHT HINDLIMB

FOR LABORATORY USE ONLY

31. LABORATORY NAME/CITY/STATE FL DEPT AGRI KISSIMMEE AGID VMFD	32. DATE RECEIVED 083004	33. DATE REPORTED OUT 083104	34. TEST RESULTS NEGATIVE <input type="checkbox"/> Negative <input type="checkbox"/> Positive <input type="checkbox"/> AGID <input type="checkbox"/> ELISA
36. SIGNATURE OF TECHNICIAN		35. REMARKS	

Falsification of this form or knowingly using a falsified form is a criminal offense and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (U.S.C. Section 1001).

NATIONAL

10830 SW 104 St. • Miami, FL 33176 • (305) 273-5788

BIO VET LABORATORY

Dr Greene, Barry (M FAX)
12012 SW Pineapple Court
Palm City, FL 34990

OWNER: Apostol
ANIMAL: Ozzie
ID:
Age: 6 Sex M
Species EQ
Mini Donkey

FINAL
SAMPLE #: 116901
DATE DRAWN: 6/07/05
RECV DATE: 6/08/05
DATE RPT: 6/08/05

Phone: 772 283-2551 Fax: 772 781-2293
Dr

TEST	NORMAL	ABNORMAL	UNITS	RANGES
CHEMISTRY				
Glucose	72		mg/dL	70-125
Sodium	131		mmol/L	127-147
Potassium	4.1		mmol/L	3.0-5.0
Chloride	105		mmol/L	89-108
CO2	24		mmol/L	22-34
Sodium/Potassium	32		Ratio	
Anion Gap	6			0-16
Serum Osmolality	269			258-279
Urea Nitrogen	11.8		mg/dL	8-26
Creatinine	1.3		mg/dL	1.0-2.4
BUN/Creatinine	9		Ratio	4-26
Total Protein	7.1		g/dL	5.5-7.5
Albumin	2.9		g/dL	2.3-4.0
Globulin		4.2 H	g/dL	2.3-4.0
A/G Ratio	0.7		Ratio	0.6-1.6
Calcium	12.8		mg/dL	10.8-14.2
Phosphorus	2.6		mg/dL	2.0-5.2
Cl/P Ratio	40		Ratio	
Ca Phos Product	33			
Bilirubin, Total		0.30 L	mg/dL	0.8-4.9
Bilirubin Direct	0.04		mg/dL	0-0.4
Bilirubin Indir		0.3 L	mg/dL	0.4-4.9
Alk Phosphatase	131		U/L	30-312
ALT (SGPT)	12		U/L	<45
AST (SGOT)	259		U/L	140-500
LDH	249		U/L	80-540
GGT	22		U/L	<46
Creatine Kinase	177		U/L	40-300
Cholesterol	103		mg/dL	46-177
Triglycerides	90		mg/dL	5-100
Magnesium		1.11 H	mmol/L	0.52-1.06
HEMATOLOGY				
Leukocytes WBC	8.8		10 ³ /ul	5.4-12.0
Erythrocytes RBC	7.49		10 ⁶ /ul	6.80-12.50
Hemoglobin	13.8		g/dL	11.0-19.0
Hematocrit	37.7		%	32.0-53.0
MCV	50		um ³	37-59
MCH	18.4		pg	10.0-20.0
MCHC	36.6		g/dL	31.0-39.0
Seg Neutrophils		42 L	%	48-72

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OWNER: Apostol
ANIMAL: Ozzie
ID:
Age: 6 Sex M
Species EQ
Mini Donkey

FINAL

SAMPLE #: 116901
DATE DRAWN: 6/07/05
RECV DATE: 6/08/05
DATE RPT: 6/08/05

TEST	NORMAL	ABNORMAL	UNITS	RANGES
Band Neutrophils	0		%	0-1
Lymphocytes	47		%	20-68
Monocytes	7		%	1-12
Eosinophils	3		%	1-6
Basophils	1		%	0-2
Seg Neutrophils	3.70		10 ³ /ul	3.70-5.50
Band Neutrophils	0.00		10 ³ /ul	
Lymphocytes		4.136 H	10 ³ /ul	1.50-3.20
Monocytes	0.616		10 ³ /ul	0.10-0.90
Eosinophils	0.264		10 ³ /ul	0.10-0.50
Basophils	0.088		10 ³ /ul	0.00-0.29
Platelet Est	Adesquate			

End of Report