



**WILTON SIMPSON
COMMISSIONER**

Florida Department of Agriculture and Consumer Services
Division of Animal Industry
Bureau of Animal Disease Control

EQUINE INFECTIOUS ANEMIA SAMPLES PROCESSED

Section 585.671, Florida Statutes
Rule 5C-18.004, Florida Administrative Code

Please respond to:

Equine Programs Office
Division of Animal Industry
407 South Calhoun Street
Tallahassee, Florida 32399-0800
Phone (850) 410-0900

www.FDACS.gov/AI

NOTE: All documents and attachments submitted with this request are subject to public review pursuant to Chapter 119, Florida Statutes.

REPORTING LABORATORY

LABORATORY NAME: _____

TELEPHONE NUMBER: _____

EMAIL: _____

FAX: _____

MONTH/YEAR: _____

REPORTING DATA

Total number* of Florida EIA tests processed during the month
(horses residing in Florida): _____

**This number should include all electronic Coggins (GVL or USDA VSPS).*

**The effective date should be the date reported out.*

Number of positive EIA tests processed during the month: _____

Monthly totals due by the 10th of the following month.

DEPARTMENT CONTACT

Email all results to EquinePrograms@FDACS.gov

Questions: Equine Programs Office (850) 410-0900