Coggins Signature Sheet – Lab Submission

Name: | Signature:

CERTIFICATION BY ABOVE FEDERALLY ACCREDITED VETERINARIAN:
I certify with my signature that the specimens submitted with this form were drawn by me from the horses described as indicated.

Owner	**Horse Name** with Tube ID if different	Date drawn	Test Record # Lab use only	Accession # Lab use only
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Larch Hill Laboratory PO Box 813 Sherburne, NY 13460