



Maryland Department of Agriculture
Animal Health Section
50 Harry S. Truman Parkway, Annapolis, MD 21401
410.841.5810
www.mda.maryland.gov



EQUINE EVENT DENIED ENTRY REPORT

EVENT NAME:	
EVENT LOCATION:	
DATE(S) OF EVENT:	
SALE/SHOW CHAIRMAN/MANAGER NAME:	
SALE/SHOW CHAIRMAN/MANAGER PHONE NUMBER:	
I hereby certify that the below listed equidae were denied entry into this event because of improper, falsified, or no report of an official negative test for equine infectious anemia.	
SALE/SHOW CHAIRMAN/ MANAGER SIGNATURE:	
DATE:	

ENTER HORSE INFORMATION ON NEXT PAGE



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#	NAME OF OWNER	OWNER'S ADDRESS	EQUIDAE NAME	REASON
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				