

The undersigned, veterinarian at control declares to have examined the foal described below and has filled in this form to the best of his/her knowledge. Toverfee Foals name: gender: O stallion @ mare date of birth: <u>Nalegro x Furst</u> Romancier colour: breeding: owner: address: 1. How are: **Nutritional state:** @ good O normal O poor O poor General impression: @ good O normal Skin: @ good O normal O poor Remarks: 2. Are there any abnormalities on: eyes O yes @ no teeth O yes no O overbite ..... mm nose O yes o no nasal discharge O yes **⊕** no remarks. 3. Breathing normally? @ ves Ono If not, what abormalities are there? Any signes of spontanious coughing? O yes @ no ..... 4. are there any signs of pour or abnormal digestion? O yes @ no Remarks: 5. How are heartrate and pulse in rest and after trot? normal O abnormal Remarks: 6. What defects are there on legs and hooves, such as abnormal hoof shape, thickening of tendons or bones or overfilling of any no defects joint? O defects Remarks: 7. Any defects on outer genitalia? O yes @ no When stallion: 2 testicles O yes O no Both testicles present: O yes Ono Remarks: 8. Is the foal sound in walk and trot? If not, what deviations are there yes O no Remarks: 9. Are there any other signs of illness, defects or deviations? O ves no no Remarks: Dier-N-Artsen date: R.W.L. van Hooijdonk, Paardenarts

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R. VAN Hoogdonk signature:

name: