



The undersigned, veterinarian at 16-0-24 declares to have examined the foal described below and has filled in this form to the best of his/her knowledge.

Foals name: U con Dance

gender: stallion mare date of birth: 03-05-24

colour: Dark brown breeding: Nacho x Dutch Dormello

owner: de Veld

address: _____

1. How are:
Nutritional state: good normal poor
General impression: good normal poor
Skin: good normal poor
Remarks:

2. Are there any abnormalities on:
eyes yes no
teeth yes no overbite mm
nose yes no
nasal discharge yes no
remarks:

3. Breathing normally? yes no
If not, what abnormalities are there?

Any signes of spontaneous coughing? yes no
Remarks:

4. are there any signs of pour or abnormal digestion?
 yes no
Remarks:

5. How are heartrate and pulse in rest and after trot ? normal 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 joint? no defects defects
Remarks:

7. Any defects on outer genitalia?
When stallion: 2 testicles yes no
 yes no
Both testicles present: yes no
Remarks:

8. Is the foal sound in walk and trot? If not, what deviations are there
 yes no
Remarks:

9. Are there any other signs of illness, defects or deviations?
 yes no
Remarks:

date: 16-0-24 town: Nieuw

name: L.M.G. Schuurmans signature:

Dier-N-Artser
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OOSTEIND
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