

The undersigned, veterinarian at \( \frac{\text{Ver-W-Arbset}}{\text{Arbset}}\) declares to have examined the foal described below and has filled in this form to the best of his/her knowledge.

Foals name:	Udo-lenda				
gender:	stallion O mare	date of		16-05-	
colour:	chestnut	breedin	g: (	lacho x	Everdale
owner:	F. Visses		1 00		
address:	Zashoevenst	raat sos	16 PG	Berkel-6	<u>-asc</u> nec
1. How are:		e	good	O normal	O poor
	Nutritional state:		good	O normal	O poor
General impression:			) good	O normal	O poor
	Skin: Remarks:	-			
	Remarks:				
2. Are there any abnormalities on:					
	eyes	O ye	s (	no no	- 10
	teeth	O yes	•	) no	O overbite mm
	nose	O yes	;	) no	
	nasal discharge	O yes	5	o no	
	remarks				
				_	
3. Breathir	ng normally?	<b>©</b> ye		O no	
If not, what abormalities are there?					
	10 N N NO			0.00	
Any sign	es of spontanious coughing		es	0 no	
	Remarks:				•
f and a largestion?					
4. are there any signs of pour or abnormal digestion?  O yes  O no					
	December 1				
	Remarks:	•••••			
5. How are heartrate and pulse in rest and after trot ? © normal O abnormal					
S. How are neartrate and pulse in rest and after dot:					
nemo					
6. What defects are there on legs and hooves, such as abnormal hoof shape, thickening of tendons or bones or overfilling of any					
joint? On defects O defects					
Remarks:					
	hemarks				
7. Any defects on outer genitalia?					
,,,,,,		Оу	res	@ no	
	When stallion: 2 testic		yes	O no	0.50
		Both testicles		O yes	O no
	Remarks:				
and the second s					
8. Is the foal sound in walk and trot? If not, what deviations are there					
		② yes			
	Remarks:		••••••	••••	
the set illeges defects or deviations?					
9. Are there any other signs of illness, defects or deviations?  O yes					
	Remarks:	O yes			
NCIII (A).					
date:	311-7-24	town:	Den	Hout	
uate.	20 4				
name:	R-VAN MC	cypoulc signa	ture: 🕰	ea	

NOTE: THIS IS A TRANSLATION OF THE ORIGINAL VET REPORT MADE IN DUTCH, THE DUTCH REPORT IS BINDING. BECAUSE THIS IS A TRANSLATION, IT'S NOT SIGNED.