

The undersigned, veterinarian at 16-8-24, declares to have examined the foal described below and has filled in this form to the best of his/her knowledge.

Foals nan	ne:Uc	Vang	ueur Di	1V	
gender:	stallion	n O mare	date of birth	24-4-	24
colour:	Darl	Bay	breeding:	Dalegr	ox Florencio I
owner:	_Va	cquier		J	
address:	-6	emonds	eweg 13		
1. How ar	e:		•	,	
	Nutritional state		🙎 good		O poor
	General impress	sion:	<b>₽</b> good		O poor
	Skin: Remarks:	•	<b>©</b> good	O normal	O poor
2. Are the	re any abnormali	ties on:			
	eyes		O yes	Ø no	
	teeth		O yes	® no	O overbite mm
	nose		O yes	∞Ø no	
	nasal discharge remarks		O yes	<b>O</b> no	
3. Breathi	ng normally?		<b>∞</b> yes	O no	
	If not, what abou	rmalities are there	?		
Any sigr	nes of spontaniou Remarks:	s coughing?	O yes	<b>७</b> no	
4. are the	re any signs of po  Remarks:	ur or abnormal dig	gestion? O yes	<b>©</b> no	
				•••••••••••••••••••••••••••••••••••••••	•
5. How are	e heartrate and po Remarks:	ulse in rest and aft	ter trot ? (Sinor	mal O abnormal	
6. What de joint?	efects are there o Ono defects Remarks:	n legs and hooves O defects	, such as abnormal ho	oof shape, thickening o	f tendons or bones or overfilling of any
7. Anv def	ects on outer gen	italia?			
			O yes	<b>™</b> no	
	When stallion:	2 testicles	<b>Ø</b> yes	O no	
	Remarks:	on leas	oth testicles present:	t Rily d	escended yet
8. Is the fo	oal sound in walk a	and trot? If not, w	hat deviations are the	ere	O
	Remarks:	4	<b>X</b> yes	O no	
) Arothor		af :  naaa dafaata			
s. Are ther	re any other signs	of illness, defects	O yes	no	
	Remarks:			210	
data.	14-8	1.30		Den Hout	¥
date:	10-0	2-24	town:	Jannour	
name:	MHO	ten	signature:	ATTA MILE	<u>Dier-N-Artsen</u> I.C. Nijst, Paardenarts
			5		OOSTEIND
					0162-74 80 62