

The undersigned, veterinarian at 16 - 8 - 2 y declares to have examined the foal described below and has filled in this form to the best of his/her knowledge.

Foals	name: Ushuai	a		
gende	r: O stallion @ mare	date of birth:	31-05	5-24
colour	Black	breeding:	Secre	+ lover x lord leatherdale
owner	Kinders			
addres	s: Pastoor v	Hooijdonle	loian 7	lage Ewalune
1. How	1000 mg	J		30 000000
	Nutritional state:	Q good	O normal	Omera
	General impression:	. good	O normal	O poor O poor
	Skin: Remarks:	⊘ good	O normal	O poor
2. Are t	here any abnormalities on:		•••••••••••••••••••••••••••••••••••••••	
	eyes	Over	-	
	teeth	O yes O yes	ℚ no	
	nose	O yes	ℚ no ℚ no	O overbite mm
	nasal discharge	O yes	Q'no	
	remarks			
3. Breat	hing normally?	M vos	1.000000	
	If not, what abormalities are there	'	O no	
Any si	gnes of spontanious coughing? Remarks:	O yes	ĭ≪no	······································
4 1				•
4. are th	ere any signs of pour or abnormal di	gestion?		
	Remarks:	O yes	⊘ (no	
5. How a	re heartrate and pulse in rest and aft Remarks:		O abnormal	ar and a second a second and a second a second and a second a second and a second a second a second a second and a second and a second a second a second a second a second a second a secon
6. What defects are there on legs and hooves, such as abnormal hoof shape, thickening of ten joint? Cno defects O defects Remarks:				tendons or bones or overfilling of any
7. Any de	fects on outer genitalia?			
		O yes	W	
	When stallion: 2 testicles	O yes	Ø no O no	
		th testicles present:	O yes	O no
8. Is the foal sound in walk and trot? If not, what deviations are there				
	wak and trot? If not, wh	(d)	0 ===	
	Remarks:		O no	
9. Are the	re any other signs of illness, defects of	vr doviations?		
	Remarks:	^	ino	
4	11 0 3			
date:	10-0-24	town:	en Hous	Disa N. Autoon
name:	WHO USA		And.	Dier-N-Artsen M.H.C. Nijst, Paardenarts
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