

chip nr 528 21000466 9795



Please note that this is not the original veterinarian form, this is a retyped version. The original and signed form can be requested at the organisation.

### VETERINARIAN FORM FOAL AUCTION PRINSJESDAG 2017

The undersigned, veterinary at \_\_\_\_\_, declares that the foal described below has been examined and that this form has been completed to the best of his/her knowledge.

name foal: Fiokral W

gender:  colt  filly date of birth: 27.06.2017

color: \_\_\_\_\_ pedigree: Diamant Deschilly + grannus

owner: B. Weeber

city: Lisselmuider

1. How are:  
State of nutrition  good  normal  inadequate  
general appearance  good  normal  inadequate  
Coat condition  good  normal  inadequate  
Comments: /

2. Are there any defects in:  
eyes  yes  no  
teeth  yes  no  overbite 1.5 mm  
nose  yes  no  
discharge from the nose  yes  no  
comments: /

3. Is the respiration normal?  yes  no  
If not, what is the defect? /

Have you observed any spontaneous coughing?  yes  no  
comments: /

4. Are there any symptoms which indicate a poor or abnormal digestion?  
 yes  no  
comments: /

5. What is the state of the heartbeat and pulse at rest and after trot?  normal  aberrant  
comments: /

6. What defects are there concerning the limbs and hooves such as defective hoof shape, thickening of tendons or bones or enlargement of any joints?  no  yes defects  
comments: /

7. Are there any defects of the external genitalia? If so, what are they?  
 yes  no  
if stallion: 2 testicles  yes  no  
testicles descended  yes  no  
comments: /

8. Does the foal show regularity in walk and trot? If not, what are the defects?  
 yes  no  
comments: /

9. Are there any other symptoms of sickness, defects or faults? If so, which ones?  
 yes  no  
opm. /

date: 15-09-2017 at (place): Lisselmuider

name: E. Rook signature: [Signature]