

I, the undersigned veterinarian, Jorinde de Vries N6147 declare to have examined the foal on 09/12/2021.

Name foal: Varan van het Vergohof dxb

Microchip: 981100004643470

Sex: colt

Color: bay

Date of birth: 14-07-2020

General health: *good*
Nutritional status: *normal*
Skin: *normal*

Are there any abnormalities in

Eyes *no*

teeth *no*

Nose *no*

Nasal discharge *no*

Breathing at rest *normal*

After exercise *normal*

Heartbeat at rest *normal*

After exercise *normal*

Digestive system

Are there any symptoms that may indicate abnormalities in the digestive system *no*

Musculoskeletal system

abnormalities *no*

Is the foal sound at walk and trot? *yes*

Are there any other abnormalities or symptoms of illness *no*

Date: *09-11-2021*
Sint-Laureins

Place:

Name veterinarian: *Jorinde de Vries*

Signature and stamp:


Jorinde de Vries
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