VETERINARY CERTIFICATE

The undersigned veterinary, ANN. H. KRAWI. E.C, declares that foal discrabed below has been examined and that this form has been completed to the best of his/her knowledge.
Horse name: BANDOLED
Date of birth: 01/01/7017
Gender: GELDING
Color: 844
Pedigree: N/M
UELN: TRANSPONDER (ODE 616098 200449078
City: S74MANOW 58170
1. How are: State of nutrition: good / normal /inadeqate Genneral Appearance: good / normal /inadeqate Coat conditins: : good / normal /inadeqate
2. Are there any defects in: Eyes no abnormalities / yes, see comments Teeth no abnormalities / yes, see comments Nose no abnormalities / yes, see comments Dischargefrom the nose: no abnormalities / yes, see comments Comments
3. Is the respiration normal? Yes / No Have you observed any spontaneous coughing? Yes No Comments
4. Are there any symptoms which indicate a poor or abnormal digestion? No Yes, see comments
5. What is the state of the heartbeat and pulse at rest and after trot. Normal abberant
6. What defects are there concerning the limbs and hooves suchas defective hoof shape, deviation of the legs, thickening of tendons or bones or enlargement of any joints? No deffects / Yes deffects, see comments: