



The undersigned veterinary, E. van Hove, 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 : Almond Ep 2

Gender: colt - filly

Date of Birth: 01/06/23

Color: chestnut

Pedigree (ffm): Apollon x walnut de l'ave

Owner: ep

Residence: Heerhout

1. How are:

State of nutrition good - normal - inadequate
 General Appearance good - normal - inadequate
 Coat conditions good - normal - inadequate
 Comments : _____

2. Are there any defects in:

Eyes yes - no
 Teeth yes - no if overbite: _____ mm
 Nose yes - no
 Discharge from the nose yes - no
 Comments : _____

3. Is the respiration normal? yes - no
 If not explain: _____

Have you observed any coughing yes - no

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
 Are there any heart murmurs? yes - no

6. What defects are there concerning the limbs and hooves? yes - no defects
 Are there any limb deformities? yes - no
 Comments : _____

7. Are there any defects of the external genitalia?
 Comments : _____
 If Stallion: 2 testicles: yes - no
 If Stallion: testicles descend yes - no

8. Does the foal show defects in walk and/or trot? If yes what are the defects? yes - no
 Comments : _____

9. Are there any other symptoms of sickness, defects or faults? yes - no

Signed by :
 Date - Location : 04/09/23
Heerhout

Signature
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