

CERTIFICATE OF VETERINARY EXAMINATION OF A HORSE PRIOR TO SALE AT AUCTION

(See Note 1)

The notes 1 to 4 appear on the reverse of this certificate

THIS IS TO CERTIFY THAT:

On: (Date & Time) 17 JUNE 2020 12 NOON

AT THE REQUEST OF AND ON BEHALF OF THE SELLER

Seller's Name & Address:
DAVENPORT STUB
FIR TREE FARM
SWETTENHAM HEATH CW12 2LW

I HAVE EXAMINED THE HORSE DESCRIBED BELOW WHICH IS TO BE

ENTERED FOR SALE BY AUCTION ON (Date of Sale) 30/6/2020

AT (Place of Sale) BARBICHOPE ONLINE AUCTION

SELLER'S DECLARATION:

I declare that the horse described opposite is offered for sale as being suitable for:

COMPETITION / SHOW JUMPING

I declare that this horse has not received any surgery, medication or abnormal nutrients likely to interfere with the findings of a clinical examination and is not subject to any disease, injury, physical abnormality or any vice, other than recorded below or declared here:

NONE

This certificate is to be used solely in connection with the sale shown opposite.

Signature [Signature]

Date 19 / 06 / 2020

DESCRIPTION OF THE HORSE

Horse's Name <u>ONE SHORTCUT</u>	Breed or Type <u>AES</u>	APPROXIMATE AGE RANGE by Dentition* OR by Documentation* (* delete as appropriate)
Passport Number <u>826002190888712</u>	Sex <u>COLT</u>	(See Note 2)
Microchip Number <u>981000010669419</u>	Colour <u>BROWN</u>	

STAGES OF THE EXAMINATION (See Note 3)

I omitted stage(s) of the standard procedure because

During the third stage of my examination the horse was (State the type of exercise) FREE SCOTCHED

Flexion tests were performed on the following limbs: LEFT FORE / RIGHT FORE / LEFT HIND / RIGHT HIND (delete those tests not performed)

Trotting on a small diameter circle on a firm surface WAS / WAS NOT performed NO SUITABLE AREA

A blood sample WAS / WAS NOT taken from the horse during the examination (for medication analysis if required).

REPORT OF RELEVANT CLINICAL FINDINGS

NONE.

Report continued on attached sheet YES / NO

OPINION OF THE EXAMINING VETERINARY SURGEON (See Note 4)

In my opinion, on the balance of probabilities, the clinical findings reported above DO / DO NOT prejudice this horse's suitability to be used for

SHOW JUMPING.

Veterinary Surgeon's Signature [Signature] Date of Signature 19 JUNE 2020

Veterinary Surgeon's Name K COUB MRCVS
 And Address (In Block Capitals) ASHBROOK EQUINE HOSPITAL
MIDDLEWICH ROAD AUSTON WAI6 9JQ.

THE EXAMINATION REFERRED TO IN THIS CERTIFICATE MUST TAKE PLACE WITHIN 14 DAYS OF THE AUCTION