

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) 24 / 6 / 21 16:00

AT THE REQUEST OF AND ON BEHALF OF THE SELLER

Seller's Name & Address: Mr D. RYDER

5 LITTLE CLOSE

PEN WORTHAM, PRESTON,

PR1 9YL

I HAVE EXAMINED THE HORSE DESCRIBED BELOW WHICH IS TO BE

ENTERED FOR SALE BY AUCTION ON (Date of Sale) 9/7/21

AT (Place of Sale) BOLESWORTH ELITE AUCTION

SELLER'S DECLARATION:

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

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:

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

Signature

Date

DESCRIPTION OF THE HORSE

Horse's Name	<u>CAREFUL TOUCHED NUMO Z</u>	Breed or Type	<u>KWPN</u>	APPROXIMATE AGE RANGE
Passport Number	<u>05601255563217</u>	Sex	<u>MARE</u>	by Dentition* OR by Documentation*
Microchip Number	<u>52824002448550</u>	Colour	<u>GREY</u>	(* delete as appropriate)
				(See Note 2) <u>4yr.</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) RIDDEN

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

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 HIGH LEVEL SHOWJUMPING

Veterinary Surgeon's Signature P. E. Schofield

Date of Signature 26/6/21

Veterinary Surgeon's Name P. E. SCHOLEFIELD

And Address HIRD & PARTNERS CHESHIRE

(In Block Capitals) CHOWZEY OAK, TATTENHALL, CHESHIRE CH3 9GA

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