PRE-SALE EQUINE PHYSICAL SURVEY (REQUIRED)

Horse's Name UNOffici	ial WINNER	Breed _	To	
Year Foaled 2011 Co	lor Bay	Sex _	F	
Consignor - First	Last			Owner Agent
Owner - First	Last			
REMINDER - ORIGINAL NEGATIVE COG Date of Examination: 1-11-202 Medical History (Colic, Founder, Sur	Place of Examination rgery, Intestinal Disorder	: Crystal S	iratory, Nerves,	Farm
Clinical Evaluation Body Temperature: 99.6 Skin: WNL Cardiovascular (Heart Rate /Respirato				
Evidence of Bleeder:	Gastro	intestinal / Feces:	WNL	
Neurological / Musculoskeletal:	DNL			
Equine Physical Exam				
Indication of Lameness:)E	vidence of Founder o	or Laminitis:	NO
Feet:: Left Fore: Wn		Right Fore:	WK	
Left Hind: Wr	UL			_
Limbs (Examine for lameness, enlarge Left Fore: Left Hind: しい いい	<u></u>	Right Hind:	WNL	
Broodmares - Vaginal Exam: Culture	on open mare being offer	ed as broodmare):	wwe	-fort
Broodmares - Pregnant: 465 Comments, Observations and Recomments, Observations and Recommendation Examining Veterinarian:	mendations: LO2 0 MM HMMULOUS			
Phone: P.O. Soy - Tularosa, Mm	525 -	585-3561		

ThoroughbredAuctions.com LLC has the right to refuse any horse based on the results of this examination or any information known to the consignor regarding suitability of sale. If there is any doubt as to the suitability of any horse for sale purposes, notify the sale management.