## PRE-SALE EQUINE PHYSICAL SURVEY (REQUIRED)

Horse's Name 19 Samba Queen	Bree	ed To	
Year Foaled 2019 Color Boy	Se	ex Colt	
Consignor - First Last			Owner Agent
Owner - FirstLast			
REMINDER - ORIGINAL NEGATIVE COGGINS DRAWN WITHIN Date of Examination: 7/16/20 Place of Examina Medical History (Colic, Founder, Surgery, Intestinal Disorder, Surgery, Intestinal Disorde	tion: <u>Crystal</u>	Springs	
Clinical Evaluation  Body Temperature: 100.5 Eyes: 1  Skin: P 2 Skin was ses Tumors: 1  What area T RA. Shoulder  Cardiovascular (Heart Rate /Respiratory): 36/16	onl	Mouth: Scars:	il. parrot mout
Evidence of Bleeder: Ga	strointestinal / Feces	wal	
Neurological / Musculoskeletal:	5NT		
Equine Physical Exam			
Indication of Lameness:	Evidence of Found	der or Laminitis: 🔼	0
Feet:: Left Fore: Who		WNC	
Left Hind: WhC	Right Hind:	wnc	
Left Fore:		whe	
Urogential (Penis, Testicles, Prepuce) (Vulva, Vagina, Urethra	al Orifice, Cervix): _	Both testic	les destrolled
Broodmares - Vaginal Exam: Culture (on open mare being of Broodmares - Pregnant: IF open - Palpation (Comments, Observations and Recommendations:	offered as broodmare	): vix):	
Examining Veterinarian: Lularosa Equine Clinic LLC  Address:	Hon Du	Date: <u> </u>	120

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.

Send Completed Pre-Sale Equine Physical Survey Form to info@Thoroughbredauctions.com or Mail to:ThoroughbredAuctions.com LLC • 275 Battleview Terrace • Charles Town, WV 25414 (866) 652-7789 (phone & fax) • Email: info@ThoroughbredAuctions.com