

Consignors Veterinary Statement

This statement only describes the physical findings.

Horse Name: PENDING SEX ^{MUSGIE} MAY Hip No (if available) 4008

Age: 2023 Color: Sorrel ^{Pleasure} ♀ Breed: QH

Owner: IRIS AUSTIN Exam Date: 11/7/2023

	Yes	No
Eyes Clinically Normal?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Has The Horse Ever Had Colic Surgery?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
History or Evidence of Nerving?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Any Evidence or History of Laminitis, Club Foot, or P3 Rotation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Any Evidence of Infection or Disease?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is There Evidence of Objectionable Habits? Vices?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Any Major Conformation Faults Which May Effect Horses Short or Long Term Use?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Teeth and Bite Clinically Normal?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intact Males- Are Both Testicles Present in the Scrotal Sac?	<input type="checkbox"/>	<input type="checkbox"/>
Adult Mares- Is the Mare Pregnant?	<input type="checkbox"/>	<input type="checkbox"/>
If so, Last Breeding Date: _____	<input type="checkbox"/>	<input type="checkbox"/>
If Adult Mare Is Not Pregnant, Are there Any Reproductive Abnormalities?	<input type="checkbox"/>	<input type="checkbox"/>
Is the horse deaf ?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Please Describe Any Abnormal Findings:



 Veterinarian Signature

KHAN CRONE DALL
 Name (Printed)

11-7-2023
 Date