



The undersigned veterinary, MELISSA HERYGERS, declares that the foal described below has been examined and that this form has been completed to the best of his/ her knowledge.

Name foal: UTARGO OXR 2

Gender: ☒ colt ☐ filly

Date of Birth: 27/05/25

Color: Brown

Pedigree(ffm): utamaro o'ecassinez

Owner: Louise van Laek

^{*}
Contraband

Residence: Maaikeneveld 66, 2500 Lier

1. How are:

State of nutrition	<input checked="" type="radio"/> good	-	normal	-	inadequate
General Appearance	<input checked="" type="radio"/> good	-	normal	-	inadequate
Coat conditions	<input checked="" type="radio"/> good	-	normal	-	inadequate
Comments:	<u>/</u>				

2. Are there any defects in:

Eyes	yes	-	<input checked="" type="radio"/> no	if overbite: <u>1</u> mm
Teeth	yes	-	<input checked="" type="radio"/> no	
Nose	yes	-	<input checked="" type="radio"/> no	
Discharge from the nose	yes	-	<input checked="" type="radio"/> no	
Comments:	<u>/</u>			

3. Is the respiration normal? ☒ yes - ☐ no

If not explain: /

Have you observed any coughing yes - ☒ no

4. Are there any symptoms which indicate a poor or abnormal digestion? yes - ☒ no

Comments: /

5. What is the state of the heartbeat and pulse at rest and after trot? ☒ Normal - ☐ aberrant

Are there any heart murmurs? yes - ☒ no

6. What defects are there concerning the limbs and hooves? yes - ☒ no defects

Are there any limb deformities? yes - ☒ no

Comments: /

7. Are there any defects of the external genitalia?

Comments: /

If Stallion: 2 testicles: yes - ☒ no

If Stallion: testicles descendend yes - ☒ no

8. Does the foal show defects in walk and/or trot? If yes what are the defects? yes - ☒ no

Comments: /

9. Are there any other symptoms of sickness, defects or faults? yes - ☒ no

Signed by: MELISSA HERYGERS

Date - Location: 27/09/2025

Lier

Signature