



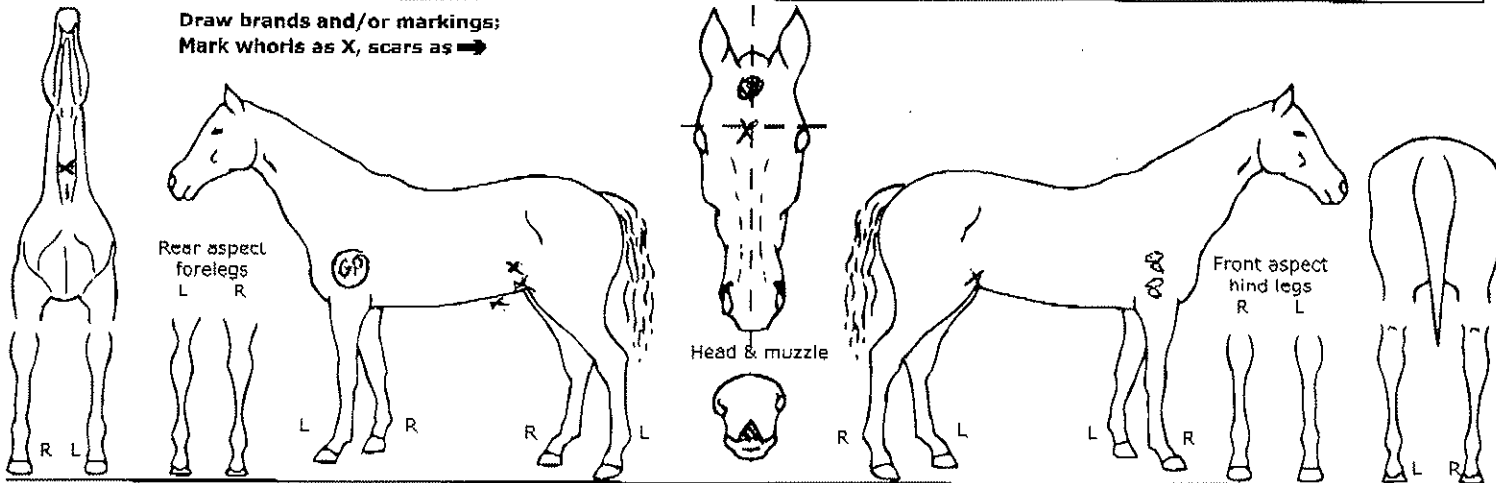
Equine Veterinarians Australia

A Special Interest Group of the Australian Veterinary Association Ltd. ABN 63 008 522 852



CERTIFICATE OF EXAMINATION FOR MORTALITY INSURANCE PURPOSES

Animal presented as:		
(If unnamed) Sire: BEAUTIFUL CROWN	Dam: FRAISCHE	
Colour: BAY	Breed: TB	Sex: Colt
Microchip No: 985100010938182	Age/DOB: 2008	
Owner (if known): DARBY BLOODSTOCK PTY LTD	Address (if known):	
Person requesting examination: MARC CONNERS	Place of examination: WARWICK FARM	



THE EXAMINATION

	Never	Occasionally	Regularly
Does your practice normally attend this property?			✓
Has your practice previously attended this horse?	✓		

Yes No

✓		Pulse Normal?
✓		Respiration normal?
✓		Temperature normal?
✓		Eyes clinically normal?
✓		Heart auscultated and found normal?
	✓	Any indication of infection or disease?
	✓	Any physical evidence of laminitis?
	✓	Is the horse lame at the walk or trot?
	✓	Is there evidence of ataxia?
	✓	Is there any obvious evidence of previous abdominal surgery?

Broodmares

		Is she reported in foal?
		Is there any external condition detrimental to satisfactory breeding?
		Has an internal examination of the reproductive organs been conducted? (If so attach a separate report of examinations conducted, dates & findings)

Stallions

		Are the external genitalia palpably and visibly normal?
--	--	---

Please give your opinion below as to the significance of any abnormalities mentioned above (add additional sheets if needed):

I have today performed a clinical examination on this horse in accordance with EVA Insurance guidelines and declare that to the best of my professional knowledge the horse is clinically normal and in a satisfactory condition, except where noted.

Date: 25/08/10	Signed:
Name (please print): AMY WILLIAMSON	Place stamp/write address here: 29277
Contact Number: (02) 9601 3444	
AVA No: 19058	VPB No: N9095