

WESTERN BLOODSTOCK LTD

VETERINARY EXAMINATION OF SALE HORSE

THIS FORM CAN ONLY TO BE COMPLETED & SIGNED BY A LICENSED UNITED STATES VETERINARIAN

SALE HORSE:

AQHA/APHA REGISTERED NAME HASHTAGS X WSR Flash Dance

AQHA/APHA Registration # Pending

UPON EVALUATION WHAT IS THE SEX OF THE SALE HORSE?

- Mare - Is this mare in foal?  No  Yes - actual date checked in foal \_\_\_\_\_ (must be within 15 days of sale)
- Stallion - are both testicles descended?  Yes  No Note: \_\_\_\_\_
- Gelding

ANSWER EACH QUESTION with the OWNER

Is VISION IMPAIRED?	Y	<input checked="" type="checkbox"/>
Does Horse CRIB In Any Way?	Y	<input checked="" type="checkbox"/>
Is There Obvious GAP BETWEEN UPPER & LOWER TEETH?	Y	<input checked="" type="checkbox"/>
Has Horse Had ABDOMINAL OR JOINT SURGERY?	Y	<input checked="" type="checkbox"/>
Has Horse Been NERVED, FOUNDERED or Had NAVICULAR DISEASE?	Y	<input checked="" type="checkbox"/>
Has Tail Been Altered In ANY Way?	Y	<input checked="" type="checkbox"/>
Is MARE Intracytoplasmic Sperm Injection (ICSI) Only?	Y	<input checked="" type="checkbox"/>

Explain Any Question Answered YES and LIST ANY SCARS or BLEMISHES upon examination:

\_\_\_\_\_  
\_\_\_\_\_

Veterinarian Signature Tom K Lavender  
An original, copy or facsimile of Veterinarian's signature shall be valid for the purpose of this form.

Printed Name of Veterinarian Tom K Lavender DVM

Contact Number of Veterinarian/Clinic 940-367-8475-C

Date of Examination of Sale Horse 7-13-23

MUST BE RETURNED TO WESTERN BLOODSTOCK, LTD. BY JULY 12, 2023

Email to: [kelsey@westernbloodstock.com](mailto:kelsey@westernbloodstock.com)