

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



CERTIFICATE OF EXAMINATION FOR PREGNANCY

SOCIAL ®	ÇEK	IIIICAIL OI L	AULITINAL.		ILOITAITO!		STRAND.
Animal presented as:	TOP	Actiess					
(If unnamed) Sire:	•		Dam:	_			
Breed:	TB	200000000	Colour	Ba	ly		
Microchip No:	985 1000	12029879			A	.ge/DOB:	b
Owner (if known):			Address (if I	(nown):			
Person requesting examination: Auckrell			Place of exa	mination: Fel	1 Vien	~ Par	h.
1.7	ds and/or marki	-	Head & muzzl	e R	L	I R	
THE EXAMINATION							
Date Rectal Ex	amination U	Itrasonographic Exam		Positive	Negative	Was there ev	idence of twins?
30/01.9						Yes	(No)
11/10/19	1	. /		1		Yes	6
25/15/19	1	1		· 🗸		Yes	6
53/13/14							
2 6 20						Yes	<u>@</u>
Comments:							
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		nira .					
Notes: 1) It is not possible to 2) To obtain insurance This is to certify that	for the pregnan	icy, these tests mus	t be complet ts on the ma	re listed abo		last date of s	service.
Date: 2 / 6 / 7 o				ed:			
Name (please print):	Place	stamp/write a	address here:	 			
	/U B	10Wh					298 19
Contact Number:		IIIamo Egi (en	nike				
AV/A No.	-	19 6488			1		
AVA No: 19043	VPB N	10: N8261		(e	~'T+1.		