

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





SSOCIATUR N	CERTIFICATE OF EX	KAMINATION FO	R PREGNANC	Y	TOSTRAUS
Animal presented as:	Winter Sky				
(If unnamed) Sire:		Dam:			
Breed: TB	,	Colour: b	ay		
POR AND	01045283373	100	. /	Age/DOB:	5 40
Owner (if known):		Address (if known):			
Person requesting examination	lackrell	Place of examinatio		Park.	o.
Praw brands and/of Mark whorls as X, s Rear aspect forelegs L R	or markings: scars as ->	Head & muzzle		M _R	
		THE EXAMINATION	A	R.P.	UL R∐
Date Rectal Examination			Negative	Was there ev	idence of twins?
2/11/20 (45)	/	/		Yes	(No)
17/5/21	/	~		Yes	6
			N.	Yes	No
				Yes	No
Comments:				I	
T					
	,			11	
Notes: 1) It is not possible to detect m 2) To obtain insurance for the p	nultiple pregnancies in all ca pregnancy, these tests must	ases. t be completed 45 da	ys or more from t	the last date of se	ervice.
This is to certify that I perfo	rmed the described test	T	d above		
Date: 17 5 2 1	90	Signed:		\sim	
Name (please print): M Brown		Place stamp/v	Place stamp/write address here:		
Combook Nivershows			awarra Equino		36101
OZ Z	4486488		PO Box 4 Serringong, NSV	V, 2534.	
AVA No: 19043	VPB No: N8261	42 c 15	(02) 4448 6	488	