Horse's Name	SPECTACILL	OR PATRICK	Breed	WELSH
Year Foaled _	2012 color _	OPEY	Sex	GELDING
Consignor - First	ELIZABETA			Owner Agent V
Owner - First		NAME AND ADDRESS OF THE OWNER, WHEN PERSON ADDRESS OF THE OWNER, WHEN PERSON AND ADDRESS OF THE OWNER, WHEN	THE RESERVE OF THE PARTY OF THE	LEARN LLC
Date of Examination:	11 11/20 Pl	ace of Examination: ntestinal Disorders, La	AMBER	Spiratory, Nerves, etc.)
Clinical Evaluation  Body Temperature:  Skin:  Cardiovascular (Heart		Eyes:WM_ Tumors:WN 28   20 - w	JL.	Mouth: MILD DANCE (
Evidence of Bleeder: _	101		tinal / Feces:	NORMAL FORMED
Neurological / Musculos	skorotar.			
quine Physical Exam		Evider	nce of Founde	er or Laminitis:
eet:: Left Fore: 134	RE FOOT	F	Right Fore: _	BARE FOOT
Left Hind:	ARE FOOT	F	Right Hind: _	BALE FOOT
mbs (Examine for lar	neness, enlargements,	abnormalities)		
Left Fore:			tight Fore:	NSF
Left Hind:	NSF	R	Right Hind:	NSE
ogential (Penis, Testic	les, Prepuce) (Vulva, \	Vagina, Urethral Orifice	, Cervix):	WAL
oodmares - Vaginal E	xam: Culture (on oper	n mare being offered a	s broodmare)	: P/A
	NA If open and Recommendation	- Palpation (Ovaries, lons:\/ A	Jterus, Cervi	x):
mining Veterinarian: _	SHAYNE	CWICCO	×	Date: 1/11/20 OSPER TY 75078
	-			
ress:	2) 595-39	now ci	PRI	osper ty 77078

nown to the consignor regarding suitability of sale. If there is any doubt as to the suitability of any horse for sale purposes, of the sale management.

Fax Completed Pre-Sale Equine Physical Examination Form to (866) 652-7789 or Mail to: