## **Examination report - Surrogate mare**

Signature:

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I, Dr. EUELINE WAN HOVE , declares to have examined the surrogate mare written Name surrogate mare : Ebora Dairpet nr Optimus: In foal of (stallion x dam ): Eldorado van de Zeshoek x Miss Optima Date of inplantation: 7/04/2023 Chip number receptor mare: 250258500132112 Owner receptor mare: Optimus Agro nv Place (address) of receptor mare : Mollentstraat 47b, 2520 Broechem, Belgium 1. What is the nutritional condition, general appearance and skin? 400 2. Does the mare breath normal? Is there spontanous coughing? Is there nasal discharge? NORMAL 3. Are there any signs which indicate a bad or normal digestion? No. 4. What is the heart rate at rest and after exercise? 5. Are there any abnormaltitles to the external genitals? If yes, what kind? 6. Are there any other signs or / and remarks that must be indicated? If yes, please discribe below. The undersigned declares, having controlled the above mare on gestation through 6/10/23 Date: Dr. Eveline VAN HO Place: Name: