

HEALTH CERTIFICATE

CERTIFICATE OF EXAMINATION

Name: RACHEL LA RIVIERA Born: 25 / 4 / 2025

Passaport nr. .....

Coat color: SAURO Sex: FEMMINA Microchip n.: .....

Father: DOMINATOR Z

Mother: BAMBY BOOM Microchip of the mother n.: 941000012763043

Localisation of the horse: SANT'ANGELO LODIGIANO (LO)

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- General state of the horse: GOOD
- Cardiovascular examination: NAD / OK
- Vision tests and eyes examination: NAD / OK
- Respiratory examination: NAD / OK
- Vision tests and eyes examination: NAD / OK
- Possible limbs default: NO
- Potential abnormality in the musculoskeletal system (in particular the presence of joint distension): NO
- Abdominal hernia detected: YES / (NO)
- Signs of infectious disease detected: YES / (NO)

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I, the undersigned Dr. CAVALLIER FRANCESCA, certify having examined the foal above ad am the usual veterinarian of his breeder.

In LODI, 22 / 08 /2025

Stamp and signature

DR.SSA FRANCESCA CAVALLIER
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