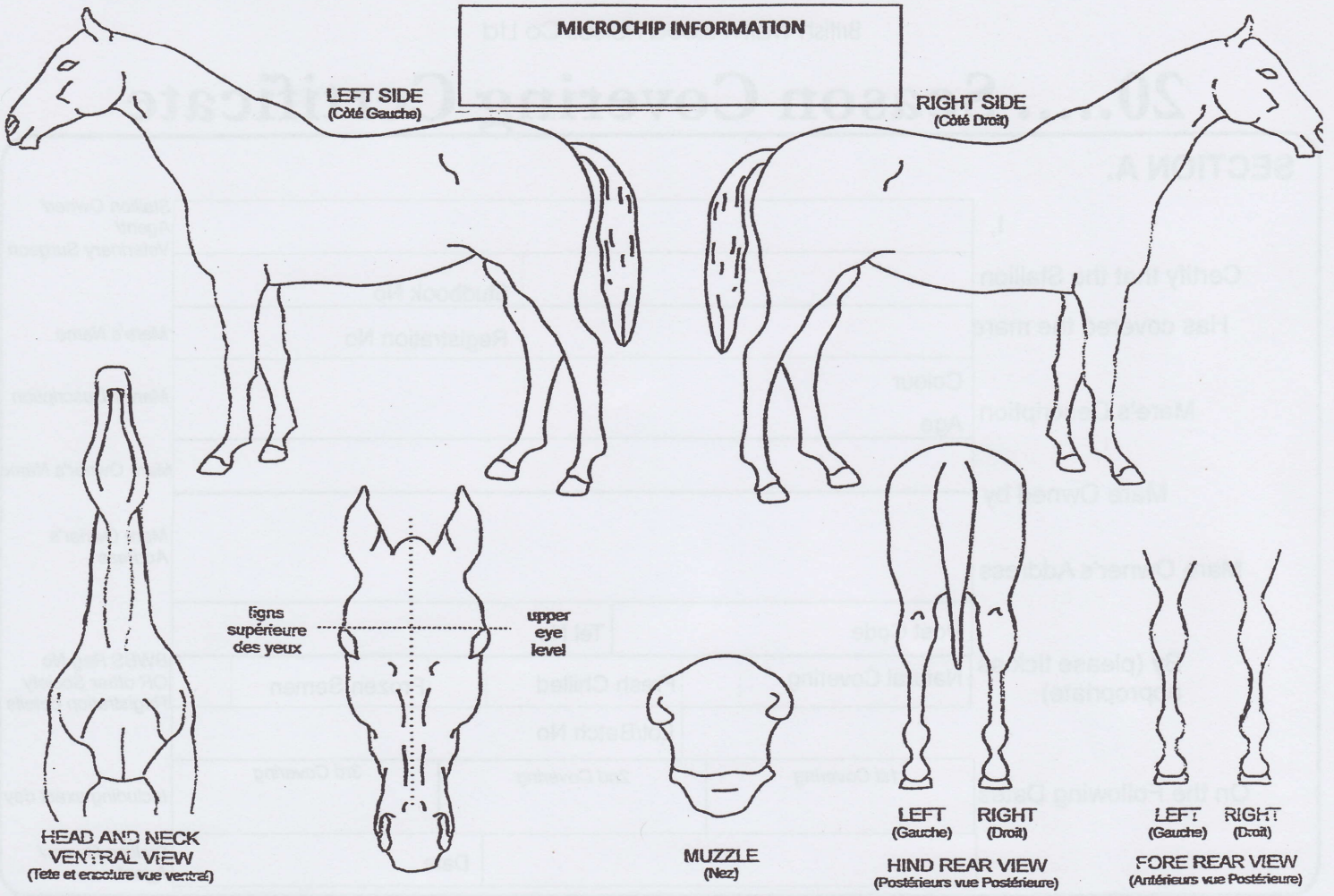


MICROCHIP INFORMATION



MICROCHIP MUST BE INSERTED AT TIME OF COMPLETION OF THIS DIAGRAM AND DESCRIPTION.
 Whorls to be shown thus X and described in detail below. : White markings to be shown in RED and described below in detail.

| | | | | | |
|-----------------|---------|----------------|---------------------|------------|---------|
| †Name of Animal | | | | †Sire | |
| Colour | Sex | †Date of Birth | Date of Examination | †Dam | |
| Head (Tête) | | Neck | | | |
| Fore Limbs | LF (AG) | | | Hind Limbs | LH (PG) |
| | RF (AD) | | | | RH (PD) |
| Body (Corps) | | | Acquired Marks | | |

I certify that these markings are correct
Veterinary Surgeon's Name
not to be the breeder, owner or trainer of the horse identified †Information supplied by owner

Address

Signature Date

I certify that these markings were taken from the foal prior to weaning : YES NO

OWNERS NAME AND ADDRESS