

## **HEALTH AND FITNESS REPORT**

The statements below are acknowledged by the consignor to be true and accurate. All buyers have the right to have a licensed veterinarian verify the below, via a <u>Limited Post Purchase Exam</u>, within 3 days of the completion of the auction and at the consignor's location, prior to finalizing payment. Please see Terms and Conditions for details.

Horse Name: Turtle	Gender: Geldir DOB: 01/01/2018 Bre	ed: Draft Cross Color: Chestnut
YES NO	DATE OF LAST:	/15/2012
Sound for Performance	worming	1/15/2012
Sound for Breeding (Gelding is No)	vaccinations	//20/2024
Clear Eyes	Farrier 03	3/20/2025
Vision Impaired	Teeth Float $\frac{12}{}$	./20/2024
Cribber	Coggins $02$	/26/2025
Weaver		
Has Neurological Disorder	Explain any abnormalities or needs:	
Scars/Bumps (including minor)		
Both testicles down (If Intact)		
Over/Under Bite		
Hearing Impaired		
Obvious Blemish		
Previous Joint Surgery		
Previous Abdominal Surgery		
Nerved/Foundered		
Navicular Disease		
Mane/Tail Extensions		
Specialty Shoes		
Special Feed or Supplements		
Skin Conditions		
Past Injuries		
Heart Condition	By signing, I acknowledge everything is true and	
Previous Injections	accurate, to my knowledge.	
Previous Colic	Molly M Sparrow (Apr 23, 2025 20:01 CDT)	04/23/2025
Previously Foaled (Mare Only)	Consignor's Signature	Date

## Health & Fitness\_Consignor\_2025

Final Audit Report 2025-04-24

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By: Amanda Horejsi (amanda@cowponysales.com)

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