

# CERTIFICATE OF VETERINARY EXAMINATION OF A HORSE PRIOR TO SALE AT AUCTION

(See Note 1)

The notes 1 to 4 appear on the reverse of this certificate

THIS IS TO CERTIFY THAT:

On: 4/2/21

AT THE REQUEST OF AND ON BEHALF OF THE SELLER

Seller's Name & Address:  
Baroda Stud,  
Old Connell, Newbridge,  
Co. Kildare

I HAVE EXAMINED THE HORSE DESCRIBED BELOW WHICH IS TO BE ENTERED FOR SALE BY AUCTION ON 10/2/21 AT Goffs February Online Sale

## SELLER'S DECLARATION:

I declare that the horse described opposite is offered for sale as being suitable for **BREEDING**

I declare that this horse has not received any surgery, medication or abnormal nutrients likely to interfere with the findings of a clinical examination and is not subject to any disease, injury, physical abnormality or any vice, other than recorded below or declared here;

This certificate is to be used solely in connection with the sale shown opposite.

Signature D J C

Date 5.1.21.21

## DESCRIPTION OF THE HORSE

Horse's Name <u>Kitkitty Lot 145</u>	Breed or Type <u>THOROUGHBRED</u>	APPROXIMATE AGE RANGE by Dentition* OR by Documentation* (* delete as appropriate)
Passport Number	Sex <u>Filly</u>	(See Note 2) <u>2017</u>
Microchip Number <u>2500FR1A451087B</u>	Colour <u>Bay</u>	

## STAGES OF THE EXAMINATION (See Note 3)

Omitted stage(s) 3,4,5 of the standard procedure because this is intended as a two-stage exam.

During the third stage of my examination the horse was (State the type of exercise) \_\_\_\_\_

Flexion tests were performed on the following limbs:  LEFT FORE /  RIGHT FORE /  LEFT HIND /  RIGHT HIND (delete those tests not performed)

Trotting on a small diameter circle on a firm surface  WAS /  WAS NOT performed

A blood sample  WAS /  WAS NOT taken from the horse during the examination (for medication analysis if required).

## REPORT OF RELEVANT CLINICAL FINDINGS

Old scar and thickening on dorsal cannon right fore.

Height : Approx 159cm

Report continued on attached sheet  YES /  NO

## OPINION OF THE EXAMINING VETERINARY SURGEON (See Note 4)

In my opinion, on the balance of probabilities, the clinical findings reported above  DO /  DO NOT prejudice this horse's suitability to be used for **BREEDING**

Veterinary Surgeon's Signature Emma HCB Date of Signature 4/2/21

Veterinary Surgeon's Name EMMA HCB MVB

And Address (In Block Capitals) TRAYTOWN GREYABBET, CO. KILDARE

**THE EXAMINATION REFERRED TO IN THIS CERTIFICATE MUST TAKE PLACE WITHIN 14 DAYS OF THE AUCTION**


**ANIMAL HEALTH LABORATORIES**
**Equine Laboratory Report**

Primary Client:	Animal Reproductive Technologies	Vet:	Andrea Carl DVM
Owner:	Bernda Stul	Received Date:	22/11/2021
Job ID:	220121-100	Wave Name:	K2 Kelly

Test	Method	Date of Test	Result
EVA	ELISA	22/11/2021	Negative
EIA	ELISA	22/11/2021	Negative

**NOTE:** In accordance with the Diseases of Animals (Equine Test Methods) Order 2009 (SI No. 507 of 2009) and the Diseases of Animals (Restriction of Infections) (Equine) Order 2009 (SI No. 508 of 2009), the holder (owner) and laboratory signatory are obliged to notify the Department of Agriculture with any positive BSE test results.

Date sample taken	22/11/2021		
Date of test result	22/11/2021		
Test	Items Detected	Result	
Tuberculosis equigenitalis (CEM3)	-Aboral Swab & Feces	Negative	
Pseudomonas aeruginosa	-Aboral Swab & Feces	Negative	
Mycobacterium	-Aboral Swab & Feces	Negative	

The following specimens were bacteriologically examined aerobically and microscopically for the presence of *Tuberculosis equigenitalis* (CEM3) for issues of Contagious Equine Metritis (CEM) and also for the presence of *Pseudomonas aeruginosa* and *Mycobacterium*. The results after incubation of the cultures for 7 days are as indicated above. It must be emphasized that a negative bacteriological finding does not necessarily guarantee absence of infection with the respective organism.

AHL is accredited by NABL to carry out testing under ISO 17025. Full scope details may be found in Reg. No. 2027. AHL also carries on External Proficiency Testing schemes for selection of CEH registered by the Department of Agriculture.

This is an original certificate and shall not be reproduced without written approval of the laboratory.



Eamon Guinean MVE MRCVS

Address: Shrogh House, Randon, Co. Cork  
 Web: [www.animalhealthlabs.ie](http://www.animalhealthlabs.ie) - Email: [info@ahle.ie](mailto:info@ahle.ie)  
 Phone: 023 885 4100 - Fax: 023 885 4199

VAT No: E 6744154H Company No: 483327

Animal Health Laboratories Ireland Ltd. Trading as Animal Health Laboratories

# GOFFS

SINCE 1866

## ANIMAL HEALTH INFORMATION FOR INTRA-COMMUNITY MOVEMENT

VENDOR'S NAME	LOT NO	NAME/ DESCRIPTION
Barca Stud	145	2017 Bay Filly - Kit Kitty Kitecat ex Olympic Glory

### MUST ACCOMPANY HORSE WHEN PRESENTED AT GOFFS ENTRANCE GATE

I HEREBY CERTIFY THAT THE ANIMAL DESCRIBED ABOVE:

- (a) has been examined by me today and shows no clinical sign of infectious or contagious disease;
- (b) is not intended for slaughter under a national disease eradication programme;
- (c) has not been vaccinated against African Horse Sickness  
(if the animal has been vaccinated, delete previous line and insert date here \_\_\_\_\_) and does not come from the territory or part of the territory of a Member State of Third Country which is the subject of restriction for reasons of African Horse Sickness;
- (d) has not been obtained from a holding which was subject to prohibition for animal health reasons, nor was it in contact with equidae obtained from a holding which was subject to prohibition for animal health reasons for the following period of time:
  - six months in the case of equidae suspect of having contacted **dourine**, beginning on the date of the last actual contact or possible contact with a sick animal; however, in the case of a stallion the prohibition shall apply until the animal is castrated;
  - six months in the case of **glanders** or **equine encephalomyelitis**, beginning on the date on which the equidae suffering from the disease in question were slaughtered.
  - in the case of **infectious anaemia**, until the date on which the infected animals have been slaughtered and the remaining animals have shown a negative reaction to two Coggin's tests carried out three months apart;
  - six months in the case of **vesicular stomatitis**;
  - one month from the last recorded case in the case of **rabies**;
  - fifteen days from the last recorded case in the case of **anthrax**;
- (e) on the basis of declarations by the owner or breeder, there are no grounds for concluding that the animal has been in contact with equidae suffering from an infectious or contagious disease during the fifteen days immediately preceding inspection.

Practice Stamp



**TROYTOWN  
GREYABBEY**  
Equine Veterinary Services  
Tel: 045 522390 / 045 521656  
www.troytowngreyabbey.ie

*Emma Rosey*  
\_\_\_\_\_  
EMMA ROSEY MVB  
\_\_\_\_\_  
4/2/21  
\_\_\_\_\_

Signature of Registered  
Veterinary Surgeon  
Name in Capital Letters

Date

Signature of Owner/Breeder

*D J Cox*  
\_\_\_\_\_

Date

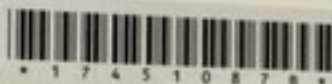
# DOCUMENT D'IDENTIFICATION d'un équidé

IDENTIFICATION DOCUMENT for equidae

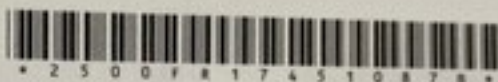
KITKITTY (FR)

FRANCE GALOP

n° SIRE : 17451087B

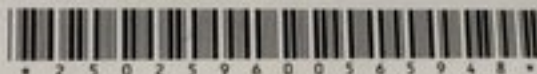


n° UELN : 2500FR17451087B



Code transpondeur : 250259600565948

transponder code :



Race - breed : PUR SANG



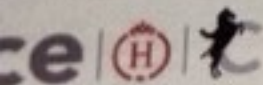
FRANCE  
GALOP

PS

Document établi conformément au règlement d'exécution (UE) 2015/262

Organisme émetteur :  
IFCE - SIRE BP3  
Route de troche  
19231 Arnac - Pompadour Cedex  
Mail : info@ifce.fr  
www.ifce.fr

France Galop  
46 PLACE ABEL GANCE  
92100 BOULOGNE BILLANCOURT  
Tel : +33 (0)149102030



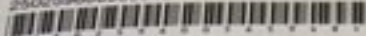
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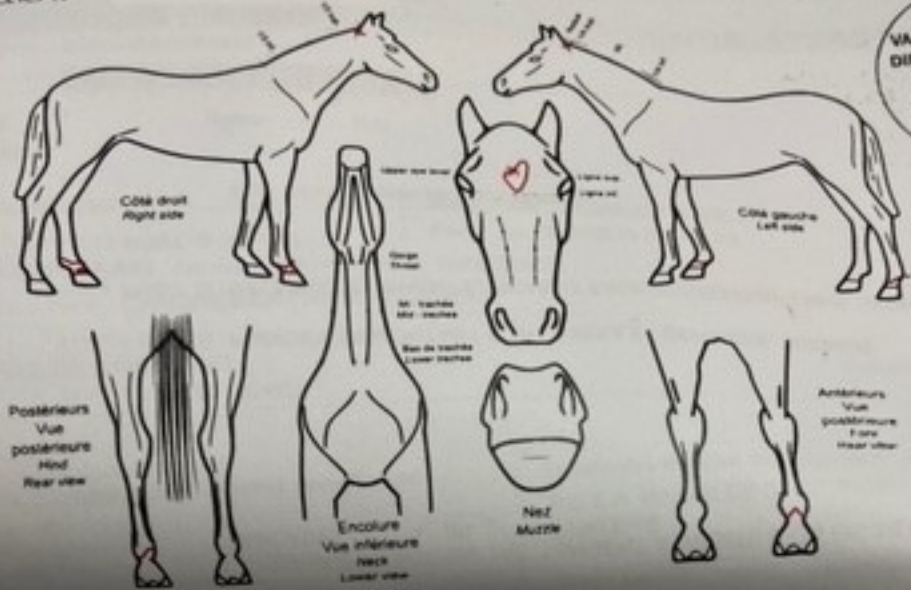


# Partie B : Signalement graphique

Part B : Outline diagram

Section I

IFCE  
VALIDATION POUR LE  
DIRECTEUR DE L'IFCE  
Effectué le :  
13 AVR. 2018  
SIRE



## la base de données

Part C : Cas

description, recording in database

NOM - Name :

KITKITTY (FR)

FRANCE GALOP

N° SIRE - SIRE Number :

17451087B

N° UELN : 2500FR174510

Vérification de la description - Verification of description

- 1) Rectifications - 1) Amendment
- 2) Adjonctions - 2) Additions

signalement conforme

N° de l'identificateur - D  
taken by : 1.64.37

Nom (en lettres capitales) e  
signature de la perso

qualifiée  
DR JULIE POUJOL  
DMV (N° d'ordre) 203

La Béchellerie 14300 Blangy-le

le - date 06/04

à - place CAMBR

Cachet de l'autorité  
compétente ou de l

émette IFCE

Stamp of  
" Modifications en

13 AVR

le - Arnac Pon  
à - place

N° transpondeur lu correspondant au n° transpondeur inscrit  
Read transponder code corresponding to registered transponder code

Oui - Yes  Non - No

N° lu :  
Read No

# Vaccination grippe équine

Equine influenza vaccination

NOM - Name :  
N° SIRE - SIRE Number :

Grippe équine seulement  
ou Grippe équine utilisant des vaccins combinés  
Enregistrement des vaccinations

Equine influenza only  
or Equine influenza using combined vacco  
Vaccination record

Toute vaccination subie par l'équidé doit être portée dans le cadre ci-dessous de façon lisible et précise et complétée par le nom et la signature du vétérinaire.

Details of every vaccination which the equine animal has undergone clearly and in detail and completed with the name and signature of v

Date Date	Lieu ou pays Place or country	Vaccin - Vaccine		Nom (en lettres ca signature du vé Name (in capital letters) and veterinarian
		Nom et numéro du lot ou Vignette Name and batch number or vignette	Maladie(s) Disease(s)	
15/11/17	ST PAIR	Proteq Flu-Te LA45592 29/12-2017	Grippe équine	DR MATHIEU LACOL DMV, IPSAV, Dipl ACVS DE France La Béraudière, 14130 E Langy - C 06 31 72 47 01 DR MATHIEU LACOL DMV, IPSAV, Dipl ACVS IN France La Béraudière, 14130 E Langy - C 06 31 72 47 01 - matlacol@orange.fr Dr Alejandro HE RIFE N° Ordre: 12197
20/12/17	ST PAIR	Proteq Flu-Te LA45592 29/12-2017	Grippe équine	
19/05/18	ST PAIR	Proteq Flu-Te LA45592 29/12-2017	Grippe équine	
7-5-19	Calvados	Proteq Flu-Te LA45592 29/12-2017	Grippe équine	

Date Date	Lieu ou pays Place or country	Vaccin - Vaccine		Nom (en lettres capitales) et signature du vétérinaire Name (in capital letters) and signature of veterinarian
		Nom et numéro du lot ou Vignette Name and batch number or vignette	Maladie(s) Disease(s)	
14/03/20	Chantilly	Proteq Flu-Te LA74026 22/01-2021	Grippe équine	Docteur Thibault VILA VÉTÉRINAIRE N° ordre: 12197
			Grippe équine - Equine influenza	
			Grippe équine - Equine influenza	
			Grippe équine - Equine influenza	
			Grippe équine - Equine influenza	
			Grippe équine - Equine influenza	
			Grippe équine - Equine influenza	