

**CERTIFICATE**

Mare:

Name: \_\_\_\_\_

UELN : \_\_\_\_\_

Owner:

Name, First name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

The above mentioned mare has been examined for a pregnancy veterinary on

\_\_\_\_\_ with the following result:

- The mare is PREGNANT
- The mare is **NOT PREGNANT**

Additional remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature examined veterinarian

Stamp veterinarian

please send to [mlehrke@holsteiner-verband.de](mailto:mlehrke@holsteiner-verband.de) – or FAX +49 (0) 4121 93629