

[illegible]

Notification of death: _____ Date _____
 Kennisgewing van dood: _____ Datum _____

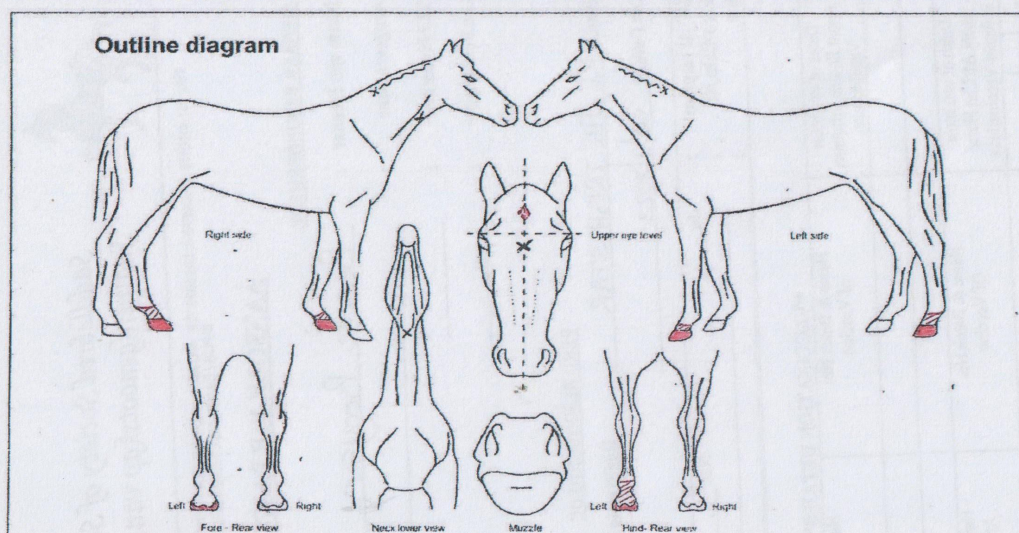
Signature of Owner: _____
Handtekening van Eigenaar: _____

Notification of Gelding: _____ Date _____
 Kennisgewing van Kastrering: _____ Datum _____

Signature of Owner: _____
Handtekening van Eigenaar: _____

GENERAL MANAGER/HOOFBESTUURDER

SEX	COLOUR	DATE OF BIRTH (DD/MM/YYYY)	SIRE	DAM	REGISTERED NAME
STALLION	RAY	03/11/2023	SHWINE JOE'S STAR	NATANIEL VALLEY'S IRISH ROSE	RV THE IRISH STAR



MICROCHIP STICKER

NAME OF VETERINARIAN

Dr. L. MURPHY

Murphy (BVSc)
SIGNATURE OF VETERINARIAN

DATE 28/07/2026

PRACTICE STAMP

Dr. L. Murphy
Piketberg Dierhospitaal
Stasieweg 12, Piketberg, 7320
022 913 1148

WRITTEN DESCRIPTION OF MARKINGS:

HEAD: STAR ABOVE UPPER EYE LEVEL, MEDIAN WHORL AT LOWER EYE LEVEL

LEFT FORE	CORONET WITH WHITE HOOF
RIGHT FORE	NIL
LEFT HIND	FETLOCK WITH WHITE HOOF
RIGHT HIND	NIL

BODY / WHORLS
BILATERAL LOW CREST WHORLS
WITH FEATHERING
LE THROAT WHORL

ACQUIRED (BRAND/FREEZE MARKS OR PERMANENT SCARS) NIL