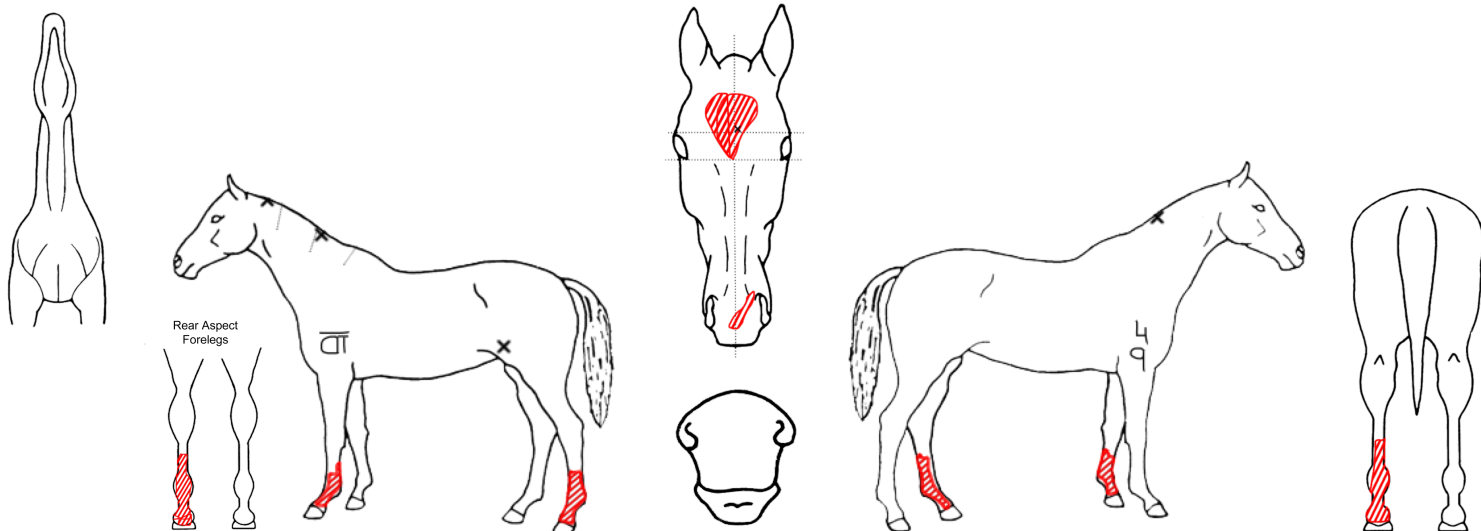


## CERTIFICATE OF EXAMINATION FOR PREGNANCY

|                                         |                     |                                       |
|-----------------------------------------|---------------------|---------------------------------------|
| Animal presented as: Jenny Jerome (AUS) |                     |                                       |
| (If unnamed) Sire: Churchill (IRE)      |                     | Dam: Tortoni (AUS)                    |
| Colour: Bay                             | Breed: Thoroughbred | Sex: Filly                            |
| Microchip No: 985100012163665           |                     | Age/DOB: 24/10/2019                   |
| Owner (if known):                       |                     |                                       |
| Person requesting examination: Owner    |                     | Place of examination: TWIN HILLS STUD |



### THE EXAMINATION

| Date       | Manual Rectal | Rectal Ultrasound | Abdominal Ultrasound | Positive | Negative | Was there evidence of twins? |
|------------|---------------|-------------------|----------------------|----------|----------|------------------------------|
| 01-05-2025 | ✓             | ✓                 |                      | ✓        |          | No                           |
|            |               |                   |                      |          |          |                              |
|            |               |                   |                      |          |          |                              |
|            |               |                   |                      |          |          |                              |

Comments:

### Notes:

- 1) It is not possible to detect multiple pregnancies in all cases
- 2) To obtain insurance for the pregnancy, these tests must be completed 45 days or more from the last date of service.

**This is to certify that I performed the described tests on the mare listed above**

|                                                   |                |                                                                                                                    |
|---------------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------|
| Date: 01-05-2025                                  |                | <br>Signed: _____<br>Signature |
| Name: Dr Mar Llisterri Gimenez                    |                |                                                                                                                    |
| Contact Number: 0404050114                        |                |                                                                                                                    |
| Address: 400 Dimnaseer Road, Cootamundra NSW 2590 |                |                                                                                                                    |
| AVA No: 116188                                    | VPB No: V13050 |                                                                                                                    |

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