**Text

Description automatically generatedSTEWARDS RULING**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **HISA Case Number:** | | | | | | **Violation Date** (mm/dd/yyyy): | | | | |
| **State Tracking Number:**  **(optional)** | | | | | | **Ruling Date** (mm/dd/yyyy): | | | | |
| **Track Name:** | | | | | | **Track HISA ID:** | | | | |
| **Issued To:** | | | | | | | | | | |
| HISA ID: | | | | | | | | | | |
| Name: | | | | | | | | | | |
| **VIOLATION INFORMATION** | | | | | | | | | | |
| Rule Number Violated: | | | | | | | | | | |
| If Applicable | | | | | | | | | | |
| Race: | Horse Name: | | | | | | | Horse HISA ID: | | |
| **RULING** | | | | | | | | | | |
| Ruling and Statement of Factual Basis (Attach additional pages as necessary): | | | | | | | | | | |
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|
| Fine Amount ($): | | | | | Days to pay fine: | | | | | |
| Points: | | | | | Class of Violation: | | | | | |
| Disqualified (DQ’d): | | Yes | No | | Purse Amount To Be Repaid ($): | | | | | |
| **Suspension (Either Consecutive Calendar Days or Race Days)** | | | | | | | | | | |
| **Consecutive Calendar Days Suspended** | | | | | | | | | | |
| Start Date (mm/dd/yyyy)**:** | | | | | | | | | Duration (days): | |
| --- OR --- | | | | | | | | | | |
| **Race Days Suspended (mm/dd/yyyy)** | | | | | | | | | | |
| Day 1: | | | | | Day 6: | | | | | |
| Day 2: | | | | | Day 7: | | | | | |
| Day 3: | | | | | Day 8: | | | | | |
| Day 4: | | | | | Day 9: | | | | | |
| Day 5: | | | | | Day 10: | | | | | |
| **Consecutive Calendar Days Suspended Pursuant to Rule 2283 “Multiple Violations”** | | | | | | | | | | |
| Start Date (mm/dd/yyyy): | | | | | | | Duration (days): | | | |
| **Other Actions to Be Completed:** | | | | | | | | | | |
| Date to Be Completed (mm/dd/yyyy): | | | | | | | | | | |
| **Steward Signature(s)** | | | | | | | | | | |
| Name | | | | HISA ID | | | | | | Signature |
|  | | | |  | | | | | |  |
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| **APPEAL INFORMATION** | | | | | | | | | | |
| Any Stewards ruling finding a violation may be appealed to the HISA Board pursuant to Rules 8320(a) and/or 8350 by filing a written request for appeal with the Board within 10 days of the issuance of the Stewards ruling. Rule 8350 specifies the information that must be included in the written request for appeal. An appeal to the Board will not automatically stay the Stewards ruling. A stay must be requested. The Board may issue a stay for good cause shown. | | | | | | | | | | |
| **PAYMENT INFORMATION** | | | | | | | | | | |
| Payment must be received by due date to avoid further penalties. Option 1) Pay online on the HISA Portal (portal.hisausapps.org) or Option 2) Send check with a copy of this ruling form to: | | | | | | | | | Horseracing Integrity and Safety Authority  401 W Main Street, Suite 222  Lexington, Kentucky  40507 | |