

Osceola County 4-H Record Book Sheep Senior (15-19)



Place Beginning Project Picture Here

Place Ending Project Picture Here

Name: _____

Birthdate: _____ **Fair Age (as of Jan. 1)** _____

Address: _____

Club: _____

Years in 4-H: _____ **Years in Project:** _____

Member's Signature: _____

Parent's Signature: _____

Leader's Signature: _____

4-H Information

The 4-H Pledge

Fill in the Blanks

I pledge...

The 4-H Motto

Fill in the Blank

“ _____ ”

The 4-H Slogan

Fill in the Blank

“ _____ ”

What 4-H Means to Me

Describe what 4-H means to you.

Showmanship

List 5 qualities of a good showperson:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

List 3 ways you can improve in showmanship:

- 1) _____
- 2) _____
- 3) _____



List 5 ways that you helped or taught others this year:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

Meetings / Participation

Keep track of meetings/events that you have participated in. Put a check in the appropriate month.

Description	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
Osceola Livestock Club (OLC)	N/A				N/A						N/A	N/A
Club Meetings (list)												
General Meetings (list)												
Pork Quality Assurance												
County Events: (list)												
State Events: (list)												
Community Service: (list)												
Committees: (list)												
Other: (list)												

Examples: Kettenun Center, Shows, Clinics, Workshops, etc.

My Market Animal Project

4-H ID Tag # of animal	Scrapies and/or RFID Tag #	Name of Animal

1. Why did you select this project? _____

2. What breed or type of project animal did you select and why? _____

3. When did you purchase your animal and why did you choose that date/age? _____

4. What factors did you consider when selecting your project (breed, age, price, disposition)? _____

5. How many and what kinds of animals did you care for? (Examples: 2 crossbred hogs, 1 angus steer)

6. What is a major factor influencing your project area industry at this time? _____

7. What is a good back fat for your project? _____

8. What do the Average Daily Gain results (page 9) tell you and what is a good rate of gain for your project animal? _____

9. List three things you have learned in your project this year.
 - a. _____
 - b. _____
 - c. _____

10. Who has influenced you the most this year in this project and why? _____

11. List 3 things you would like to change about your project animal this year **OR** list 3 things you wish you would have done differently with your animal this year?

1. _____

2. _____

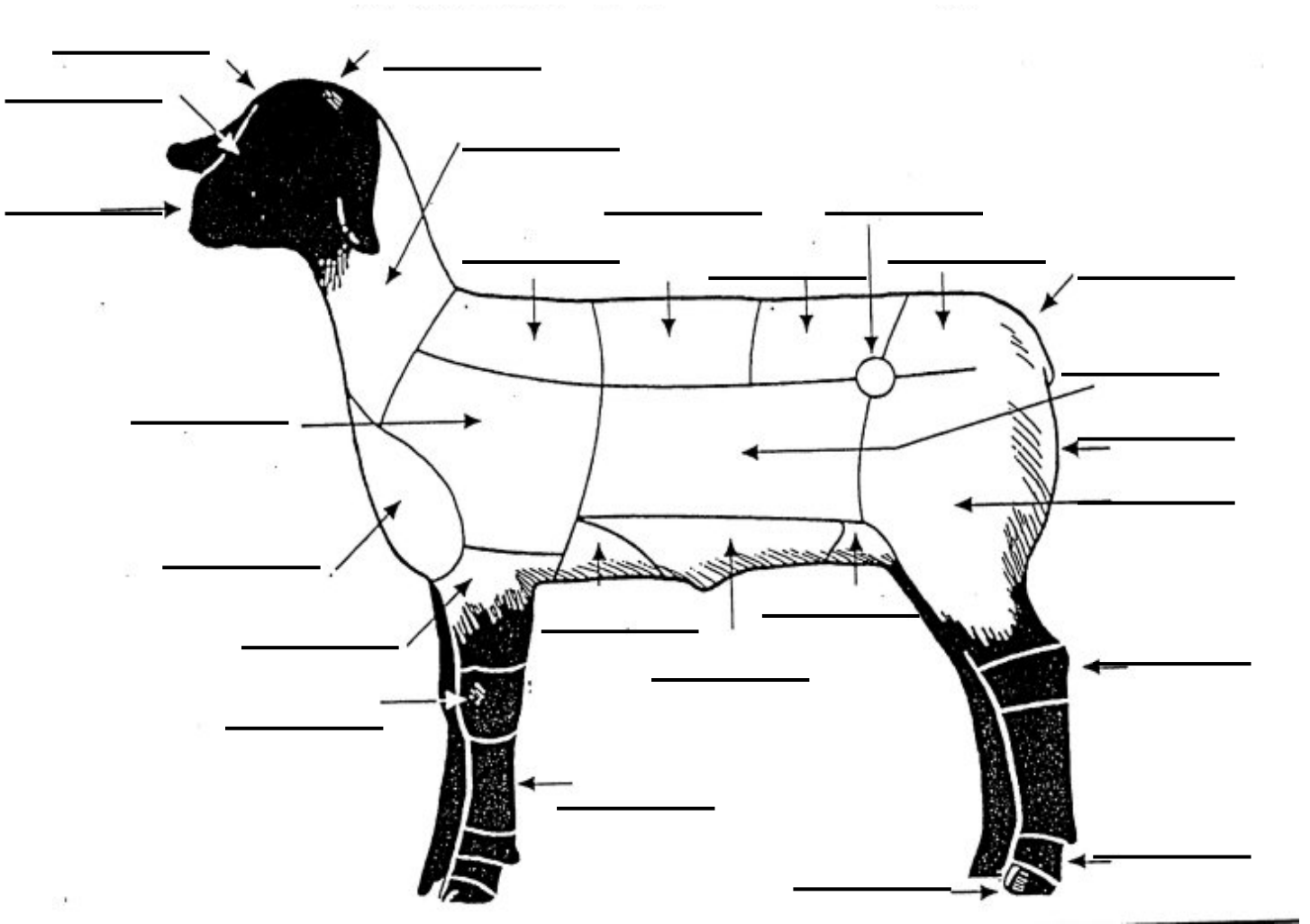
3. _____

12. List the names of 3 potential buyers that you contacted about the Livestock Sale for this project:

1. _____

2. _____

3. _____



Body Parts: Write in the name of each body part on the line. Please write legible and use correct names of parts.

Diseases: List 5 diseases and how to treat each of them

Name of Disease:

Treatment:

- | | | |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |

By-Products: List 5 by-products and where they come from

By-Product:

Source:

- | | | |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |

Retail Cuts: List 6 retail cuts and where they come from

Retail Cut:

Source:

- | | | |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |
| 6. | _____ | _____ |

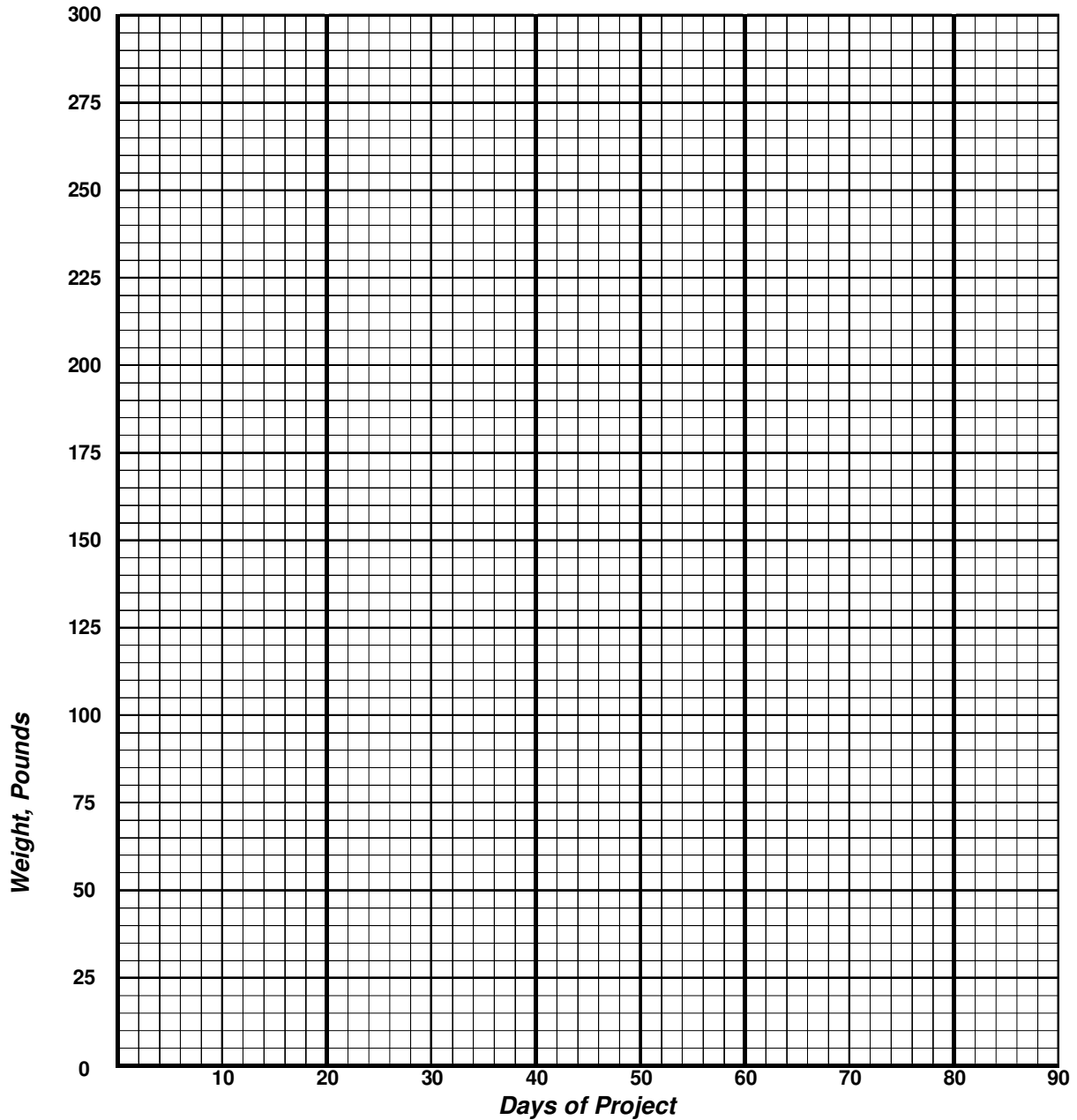
Breeds: List 5 Breeds and where they originated from

Breed:

Originated from:

- | | | |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |

Sheep Weigh Chart



Knowing how much your animal is gaining each day is a critical part of raising a healthy animal. Weights can be measured by using scales, weight tapes, or estimated. Keep track of the weights in the table below and draw the results in the chart above.

Date Weighed									
# of Days									
Weight									
Lbs. Gained									
A.D.G. *									

* A.D.G. = Average Daily Gain Calculated by pounds gained divided by # of Days

For examples of how to complete this page, please contact the County 4-H Office.

Sheep Feed / Expense Record

Name 3 of the ingredients in your feed and tell why your animal needs that ingredient: _____

Did the feed or mixture change during the project? Why and how did it change? _____

Why do you feed the type of feed you do and how does it benefit the animal? _____

Pounds Fed	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	TOTAL
Hay / Roughage									
Grains <small>(include all types of grain: corns, oats, etc.)</small>									
Minerals									
Other:									
TOTAL Pounds Fed:									
TOTAL Cost of Feed:	\$	\$	\$	\$	\$	\$	\$	\$	\$

Expense Items	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	TOTAL
Veterinary Charges									
Vaccinations									
Wormer									
Bedding									
Housing									
Other:									
TOTAL Expense Items:	\$	\$	\$	\$	\$	\$	\$	\$	\$

Project Performance Summary

Ending Weight	-	<i>minus</i>	Beginning Weight	=	<i>equals</i>	Pounds Gained	/	<i>divided by</i>	Days on Feed	=	<i>equals</i>	Average Daily Gain
Total Feed Cost	/	<i>divided by</i>	Total Lbs. of Gain	=	<i>equals</i>	Feed Cost per Pound of Gain						
Total Lbs. Of Feed Fed	/	<i>divided by</i>	Total Lbs. of Gain	=	<i>equals</i>	Lbs. Of Feed Fed per Lb. Of Gain						

Financial Summary

INCOME				
<i>Ending Weight:</i>	X	<i>Market Price:</i>	=	<i>Income from Animal:</i>
Other Income: (List items:)				
TOTAL INCOME				

EXPENSES	
Purchase price of animal (if homegrown = market value @ weigh in)	
Cost of Feed (page 8)	
Cost of other Expense items (page 8)	
TOTAL EXPENSES	

PROFIT / (LOSS): Income minus Expense (negative number equals a loss)	
--	--



More Project Photos

