



Florida 4-H Livestock Breeding Project Record Book

Name _____ Age (as of Sept. 1) _____

4-H Club _____

Project _____

Record Started _____
Month Day Year

Record Closed _____
Month Day Year

I hereby certify that as the exhibitor of this project, I have personally kept records on this project and have personally completed this record book.

Signed _____
Member Date

This youth is an active member of the 4-H Club. This record book has been completed by the youth and is an accurate record of the project.

Signed _____
4-H Club Leader Date

GOALS AND ACHIEVEMENTS FOR THIS PROJECT

Choose several goals for your project. Goals should be established at the beginning of your project. They should be challenging, yet attainable. Goals should include all aspects of your project. At the close of the project, the achievements should be compared with your goals. Check off what you plan to do or write your own in the space provided. Then, have your leader initial and date the goals you achieve.

Mark (x)-- what I plan to do:	Goal	Date Achieved	Leader's Initials	Comments
	Raise my animal(s) to completion and exhibit it at the county fair.			
	Exhibit my animal(s) at fairs other than county fair.			
	Take full responsibility for the fitting and showing of my animal(s).			
	Learn how to groom and clip my project animal.			
	Be in the top 10 of my class with my breeding animal(s).			
	Complete my record book to the best of my ability.			
	Complete a Florida 4-H Award Portfolio in my project area. (Must be 14 or older to compete.)			
	Raise offspring using sound production practices			
	Sell offspring generated in this project.			
	Learn appropriate management practices.			

Project Animal Inventory

Initial Animal Inventory											Closing Animal Inventory						
Identification of Animal								Date Obtained		Starting Weight	Starting Price or Value	Comparison Price (Market Value)	Kept	Sold			
Name & Color	ID Reg. No.	Breed	Specie	Birth Date	Dam	Sire	Sex	Raised (Born)	Purchased				Value at End of Project	Final Weight	\$/cwt. or Head	Total Price	Comparison Price(Market Value)
											\$	\$	\$		\$	\$	\$
\$											\$	\$					
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> Box 2 Value of Animals Raised </div>											<div style="border: 1px solid black; padding: 5px; display: inline-block;"> Box 3 Value of Animals Kept </div>	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> Box 4 Total Income from Animals Sold </div>					

REEDING RECORD

NATURAL MATING

Female No.	Male No.	Exposure Date	Date Male Turned in	Date Male Removed	Due Date	Comments

ARTIFICIAL INSEMINATION

Female I.D.	1 st Observed Estrus	Sire Name	Artificial Insemination Date	Due Date	Additional Information (did it take the first time, whend di you pregnancy check)	

FEED EXPENSE RECORD

Please enter information every time you purchase feed for your project. Make copies and add pages as necessary.

Date	Kind of Feed	Protein Supplement		Grain or Complete Feed*		Roughage**		Other	
		Lbs.	\$	Lbs.	\$	Lbs.	\$	Lbs.	\$
TOTAL			\$		\$		\$		\$
		1	A	2	B	3	C	4	D

* Grain includes: all concentrates, bag feeds, corn, etc.
 **Roughage includes: hay, silage, pasture, grasses, etc.

Box 6 \$ _____

Total Cost of Feed Purchased
 (add the total value of the four columns—A, B, C, D)

Box 7 _____ lbs.

Total Pounds of Feed Purchased
 (add the total of the four columns—1,2,3,4,)

Box 8 _____ lbs.

\$ _____ valued

Ending Inventory—calculate the amount of feed left at the end of your project and its approximate value.

Box 9 _____ lbs.

TOTAL POUNDS FED
 (subtract the feed left on hand (Box 8) to get the total pounds fed)

Box 10 \$ _____

TOTAL AMOUNT SPENT ON FEED
 (subtract the value of the extra feed from Box 8 to get the total amount spent on feed for your project.)

Individual Health Record

This page should be used when individual project animals are being treated (i.e. one goat has pneumonia)

Treatment Date	Animal ID • Name • Species • ID Number • Description	Symptoms Include Temperture Condition being treated and for what reason P-prevention T-treatment	Estimated Weight	Treatment Given (medications, amount, where)	Instructed Milk/Meat Withdrawal	Comments and Observations	Date Withdrawal complete	If this is an extra label or Rx drug, list the licensed veterinarian's name, address, phone numbers who prescribed or directed treatment

Group Health Record

This page should be used when you treat an entire group of project animals for the same reason (i.e. growth implant given to all project steers.)

Treatment Date	Animal ID • Name • Species • ID Number • Description	Symptoms Include Temperture Condition being treated and for what reason P-prevention T-treatment	Estimated Weight	Treatment Given (medications, amount, where)	Instructed Milk/meat Withdrawal	Comments and Observations	Date Withdrawal complete	If this is an extra label or Rx drug, list the licensed veterinarian's name, address, phone numbers who prescribed or directed treatment

LOSS (DEATH/MORTALITY) RECORD

Date	Description and ID of Animal	Estimated Weight	Cause of Loss	Value (\$) Before Death
				\$
				\$
				\$
				\$
				\$
				\$
Box 11 Total Value of Loss				\$ _____

INCOME

- A. Value of inventory and supplies at end of project
Page 4, Box #1 \$ _____
- B. Value of animals on hand (kept) at end of project year
Page 5, Box #3 \$ _____
- C. Value of animals (current market price)
Page 5, Box #4 \$ _____
- D. Show premiums won
Page 14, Box #12 \$ _____

TOTAL INCOME (add A, B, C, and D)\$ ***EXPENSES***

- A. Value of animals raised or purchased during project year.
Page 5, Box #2 \$ _____
- B. Miscellaneous expenses
Page 9, Box #5 \$ _____
- C. Feed costs
Page 10, Box #10 \$ _____
- D. Mortality/Loss
Page 13, Box #11 \$ _____

TOTAL EXPENSES (add A, B, C and D)\$ **TOTAL PROFIT or LOSS
(Total Income-Total Expenses)**\$

PROJECT PICTURES

Show the beginning and end of your project along with different skills that you have learned while participating in this project. This should include a minimum of 4 pictures and a maximum of 8 pictures. Include a caption with each picture. These captions should tell a story.

PICTURES (Continued)

Drug Statement

I HEREBY CERTIFY THAT ANY DRUG, ANTIBIOTIC OR BIOLOGICAL SUBSTANCE WHICH MAY HAVE BEEN ADMINISTERED BY MYSELF, OR ANY OTHER PERSON, WAS DONE SO IN STRICT COMPLIANCE WITH THE MANUFACTURER'S LABEL REQUIREMENTS.

Signature of Youth

Date

Signature of Parent or Caretaker

Date

Youth Project Survey

Dear 4-H'er,

You have just completed an animal science record book. We would like to ask you a few questions to help us improve the program. Please answer honestly. This will help us learn where we could do a better job in the future, as well as see what we are doing right. Please complete the attached survey and return the card to your County Extension Agent as soon as possible. Thank you for your help.

*The University of Florida
4-H Animal Science Action Team*

Please check your answer.

1. Did the record book fit your needs? ___ Yes ___ No
2. Were the instructions easy to understand? ___ Yes ___ No
3. Did any part of the record book change how you would have done your project?
 ___ No
 ___ Yes: Which parts of the record book changed how you would have done something? (please list):

5. How do you feel about your _____ project? (please fill in your specific project.)
 ___ Very Happy ___ Happy ___ Neither Happy or Unhappy ___ Unhappy ___ Very Unhappy

This record book was developed by the FL 711 Animal Sciences Design Team. Technical review and assistance was provided by the following members of the Cooperative Extension Service Animal Science curriculum team (FL711): Deborah J. Glauer, Youth Development Specialist and Team Leader, Dr. Sandra TenBroeck, Associate Professor, Department of Animal Science, Dr. Tim Marshall, Associate Professor, Department of Animal Science, Dr. Ed Johnson, Associate Professor, Department of Animal Science, Wendy T. Devito, Department of Animal Science, Dr. Ben Mather, Associate Professor, Department of Dairy and Poultry Sciences, Dr. Jacquie Jacob, Department of Dairy and Poultry Sciences, and James Umphrey, Dairy Youth Extension Specialist, Department of Dairy and Poultry Sciences, Dr. Tom Lane, Associate Professor, College of Veterinary Medicine, Dr. Tracy Hoover, Assistant Professor, Department of Agricultural Education & Communication, Dr. Joy C. Jordan, Associate Professor, Department of Family, Youth and Community Sciences, Bob Renner, Marion County Extension 4-H Agent, Sheila Andreasen, Jackson County Extension 4-H Agent, Elzy Lord, Alachua County Extension Livestock Agent, and Mark Kistler, Okeechobee County Extension Director.

This record book 4H ASR 51(DLN 109) was adapted from the Florida 4-H Livestock Breeding Record book and The Ohio State University Market Animal Record book. Publication originated June 1997, revised March, 2011.



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