** SWINE**

 **4-H PROJECT RECORD**

 **(Maximum two photos per animal/item)**

**# of Years in Project \_\_\_\_**

**This year’s goals:**

|  |
| --- |
| **Project animal(s)/item(s):**  |
|  |
|  |
|  |
|  |
|  |

**What I did and learned in this project this year:**

**Achievements/Accomplishments:**

**Problems and solutions:**

**Where/who I received help from and how they helped:**

**Examples of leadership or growth:**

**Future goals:**

** Swine Market Report**

**Animal tag #: Purchase price or value: $**

**Starting weight (if unable to weigh your animal at home, mark N/A):**

**Fair weight (finished weight):**

**Rate of gain (if no starting weight, mark N/A):**

**Animal sold for: $ Market price per pound: $**

**Animal tag #: Purchase price or value: $**

**Starting weight (if unable to weigh your animal at home, mark N/A):**

**Fair weight (finished weight):**

**Rate of gain (if no starting weight, mark N/A):**

**Animal sold for: $ Market price per pound: $**

**Animal tag #: Purchase price or value: $**

**Starting weight (if unable to weigh your animal at home, mark N/A):**

**Fair weight (finished weight):**

**Rate of gain (if no starting weight, mark N/A):**

**Animal sold for: $ Market price per pound: $**

** Swine Financial Report**

 **(Total of all animals from Swine Market Report)**

**Expenses:**

1. Purchase price or beginning value (from Market Swine Report): $
2. Feed cost: $ (cost/bag: $ , total feed used in lbs: #)
3. Bedding cost: $
4. Health records and veterinary costs:

(List below any vaccination used, worming and other health treatment plan protocol)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date | Condition treated | Treatment used | Other information(withhold times) | Cost |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. Supply costs (List supplies purchased on chart below with each cost):

|  |  |  |
| --- | --- | --- |
| Date | Item purchased | Cost |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. Transportation (if none, mark N/A): $
2. Entry fees (if none, mark N/A): $
3. Other expenses (if none, mark N/A): $

Total expenses (A through H): $

**Income: $**

1. Sale of animal(s): $
2. Fair premium(s): $
3. Other income (if none, mark N/A): $

Total income (I through K): $

**Profit or Loss: $**

 **MY 4-H YEARLY PROJECT-RELATED ACTIVITIES**

 (**4-H AND NON 4-H ACTIVITIES)**

 **(Maximum two photos per EVENT)**

**Date: Event:**

**What I did and learned:**

**Date: Event:**

**What I did and learned:**