

2024 Union County

Livestock Project Record

*This Record book is a required part
of Jr. Fair Livestock Skill-a-thons*

Complete sections

A,B,C,D,E,F-1,G,H-1,I,J,K

Complete Sections

A,B,C,D,E, F-2,G,H-2,I,J,K

Market Steers & Market Heifer

Dairy Feeder Calves

Market Hogs

Market Lambs

Market Goats

Pygmy Goats (+H-2, not H-1)

Pen of 4 Broilers (chickens)

Market Turkeys

Pen of 3 Market Rabbits

Market Ducks

Dairy Cows & Dairy Heifers

Fancy Poultry & Pullets

Breed Rabbits (nonmarket)

Dairy, Breeding, Fiber, and Pack Goats

Exhibition Ducks

Beef Breeding & Beef Feeder Calves

Sheep Breeding

Swine Breeding

Exhibition Turkey (Fancy)

Name: _____

Project(s): _____

You will need one Livestock Project Record for each species you are raising. **Note:** Be sure to provide "totals" in all sections where indicated. Complete every section indicated above for your project.

I have reviewed this record and found it to be complete and accurate.

Parent/Guardian Signature

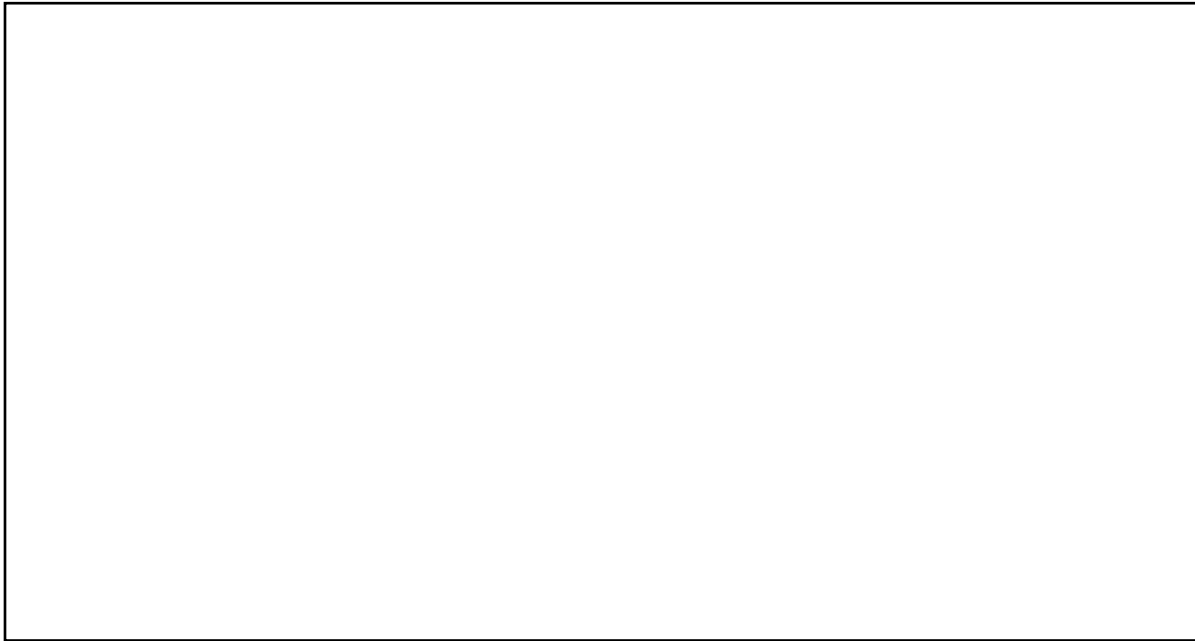
Horse Projects should use the Equine Record Book, not this Livestock Record Book



A. Beginning Picture of Project Animal(s)

Attach a picture of your animal(s) here, taken at the beginning of your project (when you first obtained) your project animal.

Date:



B. Project Animal Information (Beginning Animal Roster)

Identification of animal (a)	Sex	Breed	Date Purchased (or born)	Purchase price or value at start
				\$.
				\$.
				\$.
				\$.
				\$.
				\$.

(a) Ear tag number, ear notch, tattoo, etc.

Total Value of animals started with or purchased \$ _____
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C. Goals and Accomplishments for this Project

Write two (2) goals for your project. Goals should be established at the beginning of the project. They should be challenging, yet attainable. They should be stated in terms of definite outcomes. At the close of the project, the accomplishments should be compared with the goals. Then, have an adult initial and date the goals you complete.

Goal #1

Date _____ **Adult Initials** _____

Goal #2

Date _____ **Adult Initials** _____

D. Expenses

Date	Kind (Bedding, equipment, veterinary, transportation, health care products, show supplies, etc.) If none, write none and explain why. Include all expenses here except Cost of Animal(s) (B) & Feed (G) Note: It is not realistic to raise animals and have no expenses.	Cost
		\$
		\$
		\$
Total		\$

E. Income

Source of Income: Examples include: Sale of milk, eggs, breeding stock, show awards, etc. Include all sources of income other than sale of animals here. If you had no income, write "None" and \$0.00.		
Total		

F-1. Youth Livestock Quality Assurance

(This section should be completed by: All Swine, All Sheep, All Beef, All Dairy, Goats: Market, Pygmy, Market Broilers & Turkeys, and Market Rabbits)

Date I attended Quality Assurance Education: _____

Place: _____

List the 3 Good Production Practices for 2024:

___ Title: _____

___ Title: _____

___ Title: _____

Veterinarian Client Patient Relationship (VCPR)

As a livestock producer, you must have a Veterinarian Client Patient Relationship (VCPR)

Name of Veterinarian _____

Name of Practice/Clinic _____

Veterinarian's Phone # _____

F-2. Breed Information *(This section should be completed by Fancy Poultry, Pullets, Breed Rabbits, Exhibition Ducks, Exhibition Turkeys, Goats: Breeding, Dairy, Harness, & Pack) Beef Feeder Calves and Breeding Beef, Breeding Sheep & Swine, All Dairy Projects*

What is your breed? _____

What is the country of origin for your breed? _____

What class does your project show in? _____

Name 2 other breeds that show in the same class or division as yours 1. _____ 2. _____

For Poultry & Rabbits: Is it in the Standard of Perfection? Yes or No

Veterinarian Client Patient Relationship (VCPR)

As a livestock producer, you must have a Veterinarian Client Patient Relationship (VCPR)

Name of Veterinarian _____

Name of Practice/Clinic _____

Veterinarian's Phone # _____

G. Feed Record Summary

Start your record whenever you began feeding your animal. For breeding stock you have year round, start this record on Jan. 1st. It is not possible to raise an animal and have no feed costs. Do not leave this section blank. If you have an agreement to use feed from your parent's farm, or some other arrangement, calculate the pounds and value of the feed as if you had purchased it.

Date	Complete Pelleted Feed		Hay, Silage or Pasture		Grain		Supplements/ Additives		Other Ex. Salt Blocks	
	Lbs.	Value	Lbs.	Value	Lbs.	Value	Lbs.	Value	Lbs.	Value
		\$.		\$.		\$.		\$.		\$.
	
	
	
	
	
	
	
	
	
	
	
	
	
	
	
Total		\$.		\$.		\$.		\$.		\$.

(Add the total of the 5 feed Columns)

TOTAL FEED COST \$ _____

Feed Tag

It is important for every producer to know what they are feeding and to understand how to read a feed tag. Tape or staple one feed tag or feed mix receipt (i.e. list of ingredients and amounts) to this page from ration fed during your project.

(2 pt. deduction if no tag is attached.)

Attach Tag Here

H-1. Rate of Gain (Calculating Average Daily Gain)

This section (H) should be completed by all market animal projects. If you have not weighed your animal(s) otherwise, use the weigh-in at fair weight as your final weight.

Average Daily Gain (A.D.G.)

Animal ID	Final Weight - Beginning Weight = Total Gain ÷ Days in Feeding Period = Avg. Daily Gain
Animal #1	_____ (lbs) - _____ (lbs) = _____ (lbs) ÷ _____ days = _____ lbs/day
Animal #2	_____ (lbs) - _____ (lbs) = _____ (lbs) ÷ _____ days = _____ lbs/day
Animal #3	_____ (lbs) - _____ (lbs) = _____ (lbs) ÷ _____ days = _____ lbs/day

What is the typical Average Daily Gain for your animal species? _____

H-2. Breeding Rabbits, Exhibition Poultry, Dairy, Pack , Pgymy & Fiber Goats, Dairy Cattle, Breeding Beef and Beef Feeder Calves, Breeding Sheep, and Breeding Swine.

Hatch date or birth date of your animal. _____

Length of Gestation for your Species. (In # of Days) _____ Days

Poultry -NPIP Stands for: _____

Rabbits -ARBA Stands for: _____

I. Treatment Record

Include any and all types of health care treatment, for example: medicated feeds, worming, vaccinations, prescription, and non-prescription drugs. **If no treatments were given, write "none"**. Note: It is rare to have no health care treatments. If you write none here, you may not be caring for your animals properly.

TREATMENT RECORD								
Treatment Date and Time	Animal ID -Name -Species -ID Number -Description	Condition Being Treated	Estimated Weight (lbs)	Treatment Given (Medication dispensed, Amount & Route)	Instructed Meat/Milk/Egg Withdrawal	Name of Person Giving Treatment	Date & Time Withdrawal Complete	If this is an extra label or Rx drug, list the name, address, and phone number of the licensed veterinarian who prescribed or directed the treatment

J. Closing Animal Roster

If you plan to sell your animal through a Jr. Fair Livestock Sale, or your extra animals through a livestock market (like Producers), use an average market price during the month or week of your fair, and complete the summary below **prior to your skillathon**. Check for average price at a location **where you would sell your animal(s) if you were not going to market it at a fair**.

Examples of places you can find market prices: <http://www.uproducers.com/market-result-detail/> or <https://www.farmanddairy.com/markets/ohio>. For small animals: jacksonlivestock.net (see Saturday sale results).

Identification of Animal	Value at close of project or Estimated Sale Value
Animal(s) kept at home ID: _____	Value \$ _____
ID: _____	Value \$ _____
Animal to be sold at Jr. Fair Sale ID: _____	_____ wt. x Ave. Market Price _____ = \$ _____ est. sale value
Animal(s) to be sold at other Livestock Market ID: _____	_____ wt. x Ave. Market Price _____ = \$ _____ est. sale value
Animal(s) to be sold at other Livestock Market ID: _____	_____ wt. x Ave. Market Price _____ = \$ _____ est. sale value

K. Profit or Loss Statement *

*Do not leave this section blank, complete as if animal(s) were sold at market price. See Note above.

Income

- | | |
|--|--------------|
| 1. Value of animals kept at home (Section J) | \$ _____ |
| 2. Value of animals sold (Section J) | \$ _____ |
| 3. Other Income (From Section I) | \$ _____ |
|
Total Income (add 1, 2, and 3) |
\$ _____ |

Expenses

- | | |
|--|--------------|
| 4. Value at the start of project or purchase price (Section B) | \$ _____ |
| 5. Expenses (Section D) | \$ _____ |
| 6. Feed costs (Section G) | \$ _____ |
|
Total Expenses (add 4, 5, and 6) |
\$ _____ |
|
Total Profit or Loss (Total Income - Total Expenses) |
\$ _____ |