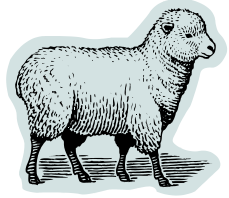




**SAWYER COUNTY
4-H PROJECT RECORD**



SHEEP PROJECT

Name:	
Years in Project:	Years in 4-H:

PLANNING

In this project, I would like to do and learn:

SUMMARY OF EXPENSES AND INCOME

Date	Description of Income or Expense	Income	Expense
	Total Feed Expense		
Total Income and Expenses			

INFORMATION ABOUT YOUR ANIMAL (This page required for each animal in your project. Copy as needed)

Name:	Breed:
Date of birth:	Single, Twin or Triplet:
For meat or wool:	Ewe or Ram:
Ear tag number:	Tattoo number:
Scrapies tag #	
If registered, registration number:	
Sire name and number:	
Dam name and number:	

CURRENT IMMUNIZATION AND VETERINARY SERVICE RECORDS

Date	Illness, Vaccination, Problem	Treatment

BREEDING AND LAMBING RECORD (for breeding animal)

Breeding history for:	Date Bred	Date Bred	Date Bred	Settled to: (Sire)	Lambing Date	# male and # female live births
1 st lambing						
2 nd lambing						

MARKET ANIMAL GROWTH RECORD (for market animal)

Name or ID of animal	Birth Date	Initial Weigh-in weight	Initial Weigh-in date	Final Weigh-in weight	Final Weigh-in date	Total weight gain	Total days fed	Average daily gain

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SHARING

How did you share what you learned with others? (Demonstrations, community service, talking to local clubs, helping other youth, Talent Explosion, district shows, State Fair, Clothing Revue, Food Revue, etc.) Do not include Sawyer County Fair.

Activity	Date/Location

SAWYER COUNTY FAIR EXHIBIT RECORD FOR THIS PROJECT

What was exhibited	Placing

WAYS YOU RECEIVED HELP THIS YEAR INCLUDE: (check all that apply)

<input type="checkbox"/>	Attended project training offered in the county
<input type="checkbox"/>	Attended project training offered at District or State Level
<input type="checkbox"/>	Guidance from 4-H Leader
<input type="checkbox"/>	Guidance from Parent
<input type="checkbox"/>	Reading and use of literature, books, audio visual resources
<input type="checkbox"/>	Guest presenters
<input type="checkbox"/>	Own knowledge
<input type="checkbox"/>	Help from friends/other youth
<input type="checkbox"/>	Other (describe)

REFLECTING

What did you do in this project?

What did you learn in this project? What did you learn about yourself?

What did you like about this project? Why?

What would you do differently in this project?

How can you use what you learned in other areas of your life?