

Osceola County 4-H Record Book Market Goat 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

4-H History

Answer the question

4-H was founded in what year?

Who founded 4-H?

In which state was 4-H founded?

In which county was 4-H founded?

The 4-H Motto

Fill in the Blank

“ _____ ”

The 4-H Slogan

Fill in the Blank

“ _____ ”

How has 4-H impacted your life?

Describe in detail

Showmanship

Top 5 goals of showmanship:

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

List 3 ways you improve since previous year:

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



List 5 ways that you can help 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
Small Animal Educational												
Mandatory Goat Meeting												
Osceola Livestock Club (OLC)												
Club Meetings (list)												
General Meetings (list)												
County Events: (list)												
State Events: (list)												
Community Service: (list)												
Committees: (list)												
Other: (list)												

Examples: Shows, Clinics, Workshops, etc.

My Market Animal Project

Scrapies and/or RFID Tag #	Name of Animal

1. Why did you select this project? _____

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

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

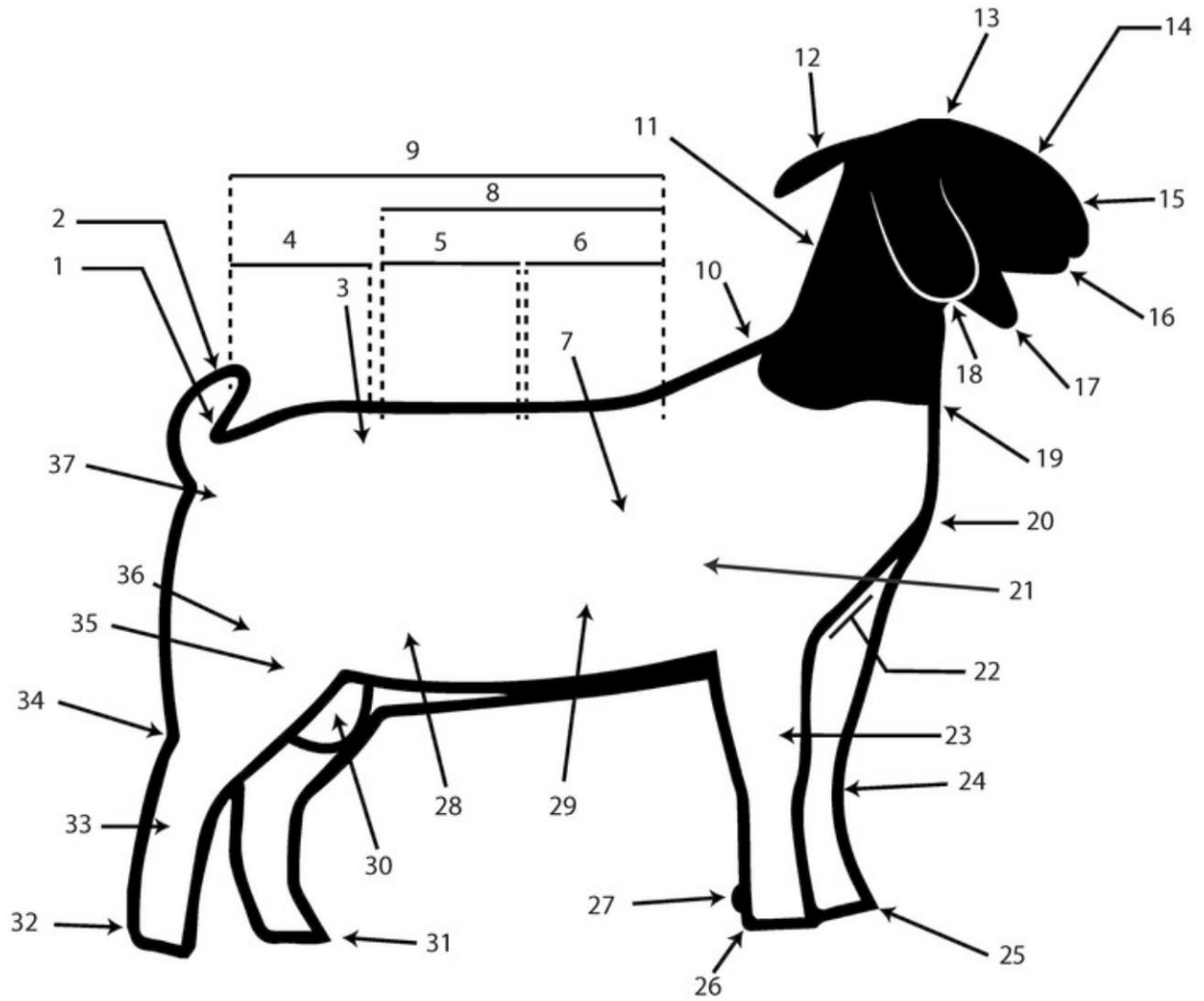
4. How many and what kinds of animals did you care for? (Examples: 2 crossbred hogs, 1 angus steer)

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

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

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

8. List three things you have learned in your project this year.
 - a. _____
 - b. _____
 - c. _____
9. Who has influenced you the most this year in this project and why? _____



1 _____	9 _____	17 _____	25 _____	33 _____
2 _____	10 _____	18 _____	26 _____	34 _____
3 _____	11 _____	19 _____	27 _____	35 _____
4 _____	12 _____	20 _____	28 _____	36 _____
5 _____	13 _____	21 _____	29 _____	37 _____
6 _____	14 _____	22 _____	30 _____	
7 _____	15 _____	23 _____	31 _____	
8 _____	16 _____	24 _____	32 _____	

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 the signs and symptoms of each

Name of Disease:

Signs and symptoms:

- | | | |
|----|-------|-------|
| 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. | _____ | _____ |

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

By-Product:

Source:

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

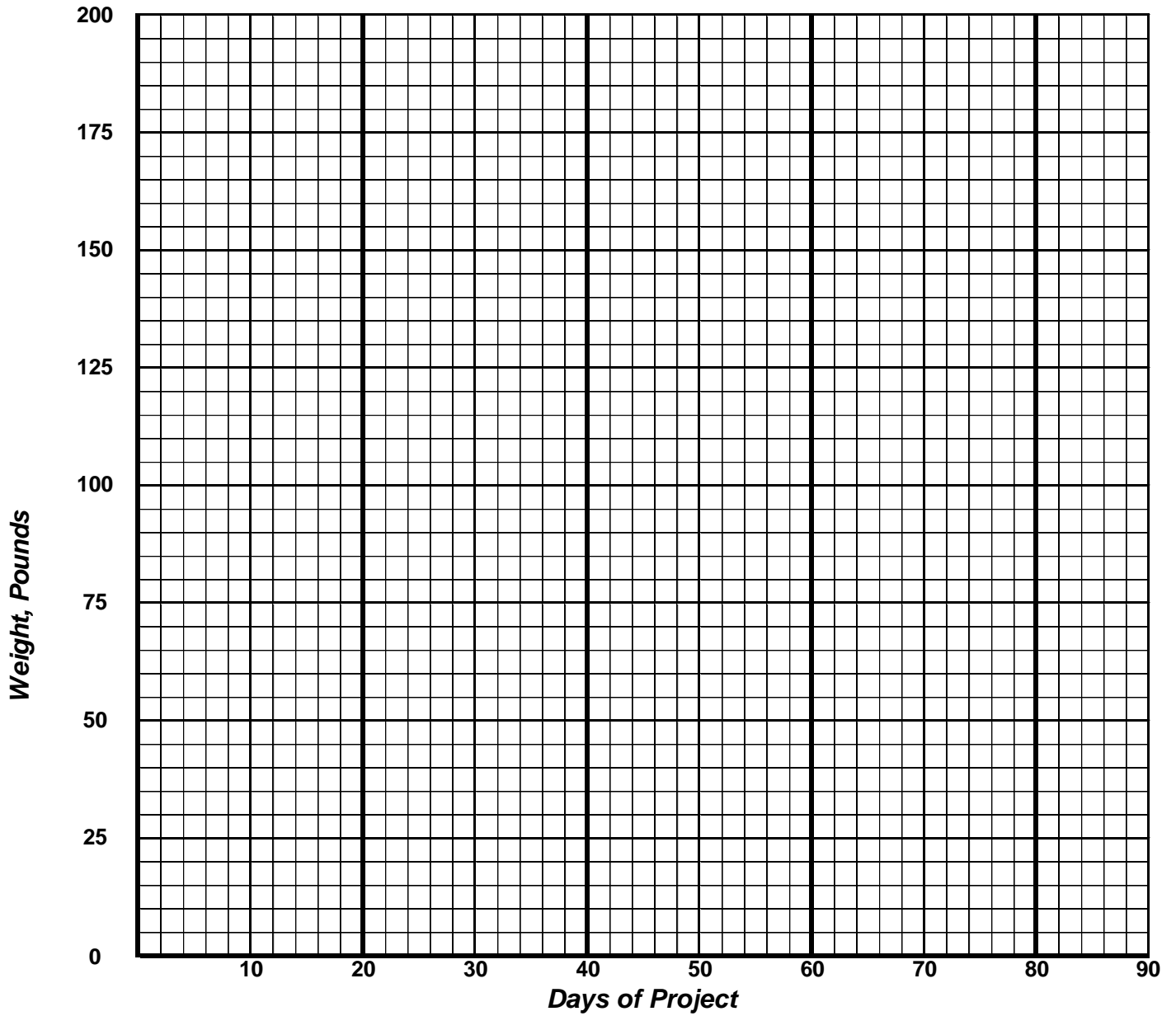
Breeds: List 5 Market Breeds and where they originated from

Breed:

Originated from:

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

Goat Weigh Chart



Knowing how much your animal weighs and how much it 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

Date Weighed									
# of Days									
Weight									
Lbs. Gained									
A.D.G. (Lbs. Gained / # of Days)									

Goat Feed

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?

What veterinarian services did you use on your project this year and why? (*full details*): _____

What open market factors play a role in your market goat project? : _____

Expense Record							
Pounds Fed	Jan	Feb	Mar	Apr	May	Jun	Jul
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
Veterinary Charges							
Vaccinations/Wormer							
Bedding							
Housing							
Trucking & Pictures							
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)	
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More Project Photos

