

**4-H Dairy Record Summary**

**For Members Grade 7 & Over**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Club year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Years in this project\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Years in 4-H\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project goals:** Write a story or make a list telling what you would like to learn in this project this year. (Talk about what you would like to make. What would you like to do? What do you hope to learn?)

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**Project story:** Write a short story about the things you worked on this year. (Talk about what you finished. What did you learn by doing this project? Did you learn what you hoped to? Why or why not?)

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**Project learning activities:** Write about where you went to learn more about this project. (Talk about what help you received. Who helped you? What did you learn from them?)

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(*Use additional pages if needed*) -over-

**Number of meetings held in this project in my club**\_\_\_\_\_\_\_\_Number I attended\_\_\_\_\_\_\_\_\_\_

**Number of meetings held in this project in the county**\_\_\_\_\_\_Number I attended\_\_\_\_\_\_\_\_\_\_

**Talks or demonstrations given in this project** (indicate club or county level)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Club, County, District, State or National events you took part in as a part of this project** (Did you work on committees? Did you attend special programs or training meetings? Did you take any tours that helped you learn about this project?)

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**Public exhibit of this project (place  in box where exhibited):**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| List individual items shown in this project | Club Mtg | Club Tour | Blake’s Prairie Jr. Fair | Boscobel Farmers Day | Fennimore Fair | Grant County Fair | Platteville Dairy Days | Other | Other | Other | Other | Other | Other | Other | Other |
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**Check appropriate box/boxes**

Ownership (you own the project)

Partnership (you and someone else share the ownership)

Managerial (someone else owns the project, but you manage it)

**Financial - Chore arrangement with my parents:**

**Beginning Inventory (on-hand as of October 1st):** (Animals can be grouped together by age if comparable.)

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| --- | --- | --- | --- |
| **Description** | **Unit** | **Unit Value** | **Total Value** |
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|  | **Total Value (carry to line C, page 4) $** | | |

**Ending Inventory (on-hand as of September 30th):** (Animals can be grouped together by age if comparable.)

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| **Description** | **Unit** | **Unit Value** | **Total Value** |
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|  | **Total Value (carry to line B, page 4) $** | | |

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| **Income - Animals Sold - Milk Sold** | **Value** |
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|  | **Total Income $** |

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| --- | --- | --- | --- |
| **Premiums Received**  Fair or Event | **# In Class** | **Placing** | **Value** |
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|  | **Total Premium Income** **$** | | |

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| **Other (miscellaneous, equipment sold, etc.)** | **Value** |
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|  | **Total Income $** |

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| **Expenses: feed (list separately), supplies & equipment, subscriptions,**  **veterinary expenses, entry fees, breed association dues, etc.** | **Value** |
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| **Total Expenses (carry to line D, page 4)** | **$** |

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**FINANCIAL SUMMARY**

A. Total project income (from page 3 & 4). . . . . . . . . . . . . . . . . . . $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

B. Ending inventory (from page 3). . . . . . . . . . . . . . . . . . . . . . . . . .$\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL PROJECT INCOME** (Add A and B). . . . . . . . . . . . . **$**\_\_\_\_\_\_\_\_\_\_\_\_\_\_

C. Beginning inventory (from page 3) . . . . . . . . . . . . . . . . . . . . . . . $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Total expenses (from page 4) . . . . . . . . . . . . . . . . . . . . . . . . .. . .$\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL PROJECT EXPENSES** (Add C and D) . . . . . . . . . . **$**\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL PROJECT PROFIT (+) or LOSS (-)** . . . . . . . . . . . . . . . . . . . . . . . . . . . **$**\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Subtract Expenses from Income)