



Lincoln County 4-H Project Record



Swine Project

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

Planning:

Explain what you would like to do and learn while completing this project. Be sure to tell why you choose to work on this project this year.

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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)

Sharing

How did you share what you learned with others? (Demonstrations, community service, talking to local clubs, helping other youth, Project Discovery Day, district shows, State Fair, Clothing Revue, etc.) **Do not** include Lincoln County Fair.

Date	Activity	Location

Lincoln County Fair Exhibit Record for This Project

What was exhibited	Placing

Animal Information (This page required for each animal in your project. Copy as needed)

Name:	Breed:
Date Of Birth:	Litter Number:
Ear Tag Number:	Individual Pig Number in Litter:
If Registered, Registration Number:	
Sire (Boar) Name And Number:	
Sow Name And Number:	

Vaccination and Treatment Records

Vaccination or Condition Being Treated	Date/Time	Est. Weigh	Treatment Given	Instructed Withdrawal	Withdrawal Completed Date/Time

Breeding and Calving Record (For Breeding Animal)

Breeding history:	Date Bred	Date Bred	Date Bred	Settled to (Sire):	Litter Date	# live male & female births
1 st litter						
2 nd litter						
3 rd litter						

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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Financial Statement

Expenses: Summarize all expenses for each project/outing, totaling the cost of any new tools, equipment, materials or supplies, travel costs, any related fees (exhibit or entry fees), etc. Include a line that lists the value of your starting inventory (tools, equipment, materials or supplies used in the project that you already owned).

Income: Summarize each income opportunity from participating in the project (if any), totaling any money earned. Include any premiums or prizes earned.

Date	Description of Expense/Income	Total Expenses	Total Income
	Total Feed Expense	\$	\$
	Total Veterinary Expenses	\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
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Total Project Expenses/Income		\$	\$

Summary of Finances

Total Project Income (including fair premiums)		\$
Total Project Expenses/Beginning Inventory	–	\$
Total Project Profit or (Cost)		\$

Reflecting

- Considering the things you wanted to “do and learn”, what did you do and learn?
- The following questions are to guide your thinking as you reflect on the past year in this project. These questions are not meant to be answered by you in a list format. Think about: What didn’t go as planned? What did you do about it? What did you learn as a result? What would you do differently? What did you learn about yourself? What skills did you learn? How will you use these skills in other areas of your life? What kind of interaction with adults did you have? How did this help in learning about your project?
- Add a page(s) with pictures or drawings. Pictures or drawings must be captioned.

Lined writing area with 20 horizontal lines.