



## EXHIBITOR INFORMATION

Year:	
Exhibitor Name:	
Age (January 1 of current year)	
Years Exhibiting Bucket Calves	
Parent/Guardian Name(s)	
4-H Club Name	

## CALF INFORMATION

Name	
Ear Tag #	
Birth Date	
Sex: Heifer <u>OR</u> Steer <u>OR</u> Steer calves	
Kind: Beef <u>OR</u> Dairy	
Breed and/or Color	
Where did you buy/get?	
When did you buy/get?	
A. Weight & Date – Start of Project	
B. Weight & Date – Currently	
C. Pounds Gained (B - A)	

## EXPENSE SUMMARY

Purchased/Valued Amount	\$
Feed Cost	\$
Medication/ Veterinary Cost	\$
Additional Cost (Explain)	\$
TOTAL EXPENSES	\$

# 4-H BUCKET CALF RECORD BOOK York County

# CALF CARE

What did you feed your calf each day for the first 90 days?

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What did you feed your calf each day for 90 - 180 days? What do you feed your calf now?

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What equipment and supplies did you need to care for you calf?

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Write a short story about when you got your calf, shots and/or medicine given to your calf, what you have learned from the bucket calf project, and the challenges and/or fun you had raising and taking care of your calf. *If more space is needed, use back of this sheet or attach no more than one additional sheet.*

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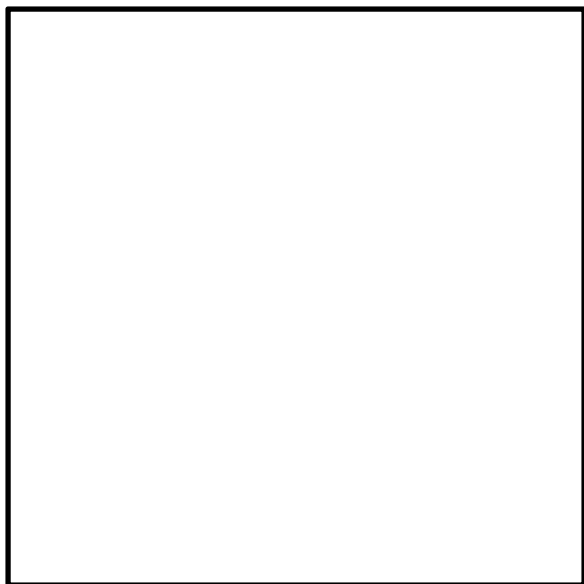
# FUTURE PLANS

What do you plan to do with your calf after the fair? \_\_\_\_\_

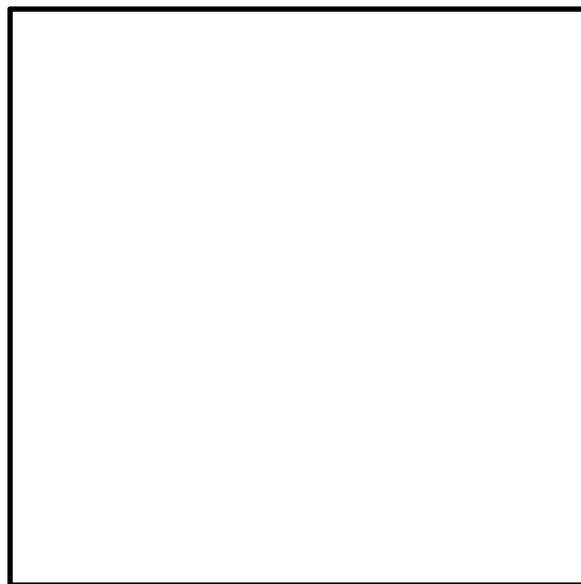
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Do you plan to take the first and/or second year bucket calf project next year? \_\_\_\_\_

# PHOTOS



Beginning Project Photo



Current Project Photo

# ADDITIONAL PHOTOS

4-H Member Signature:

4-H Project Leader Signature:

Parent/Guardian Signature: