

Washington

EXHIBITOR INFORMATION

Exhibitor Name	
Exhibitor # (Back Tag)	
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> Bull	
Kind: Beef <u>OR</u> Dairy <u>OR</u> Crossbred	
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	\$

CALF CARE

What did you feed your calf each day for the first 90 days?
What did you feed your calf each day for 90 - 180 days? What do you feed your calf now?
What equipment and supplies did you need to care for you calf?
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.

FUTURE PLANS

What do you plan to do with your calf after the fair?				
Do you plan to take the first and/or second yea	r bucket cal	f project next year? _		
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PHOTOS				
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Beginning Project Photo		Current Pro	 oject Photo	,
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ADDITIONAL PHOTOS				

4-H Member Signature:
4-H Project Leader Signature:
Parent/Guardian Signature: