



Revised 09/2019

# Pima County 4-H Poultry Project Record

Note: Complete one record for each project. Your 4-H Records may be hand written in pen or pencil, type written or computer generated.

Year \_\_\_\_\_  
Project \_\_\_\_\_  
Years in Project (including this year) \_\_\_\_\_

Name: \_\_\_\_\_ County: \_\_\_\_\_

Date of Birth (MM/DD/YY) \_\_\_\_\_ Age (prior to January 1st) \_\_\_\_\_

4-H Club: \_\_\_\_\_

I declare that the information in this record is correct and all 4-H requirements have been completed, to the best of my knowledge.

Member's signature \_\_\_\_\_

Parent's signature \_\_\_\_\_

Leader's signature \_\_\_\_\_

Leader's comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Poultry Project Record Book

## Project Information

Club: \_\_\_\_\_ Meeting Day of Month: \_\_\_\_\_

Project Leader's Name: \_\_\_\_\_ Project Leader's Phone#: \_\_\_\_\_

Project Meeting Location: \_\_\_\_\_

## Animal Care & Management

Your project requires regular care and management. List the things necessary to take care of your project animal(s). Include the following:

- Feeding and watering practices
- Egg handling
- Health practices and medicines
- General Management (cleaning living area, etc.)

**Daily Tasks-** things done once or twice a day.

**Weekly Tasks-** things done once or twice a week.

**Monthly Tasks-** things done once a month.

**Yearly Tasks-** things done one time or occasionally throughout the year.

# Poultry Inventory Record

Use one chart for all project birds at the beginning of the project year. Add pages if necessary.

Animal ID (Leg Band)	Description (Breed, Color, Marking, etc.)	Date of Hatch	Sex	Ownership Information	Purchase Price	Value*
1.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
2.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
3.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
4.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
5.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
6.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
7.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
8.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
9.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
10.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
11.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
12.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
13.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
14.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		
15.				<input type="checkbox"/> Raised <input type="checkbox"/> Purchased Date-		

\*The price you would ask if selling the bird

# Project Goals

At the beginning of your 4-H project, list goals— what do you want to make, learn, or do in this 4-H project?

What steps are needed to reach your goals?

Blank area for writing project goals and steps.

# Project Activities

During the year, describe project activities completed and meetings attended.

Date	Description

# Project Inventory

**Note:** *This inventory list is designed to be a tool to help you identify resources used in your project. This is only an estimate of the value of all items listed in the inventory. You do not need to consider depreciation.* Record here food, fabric, materials, equipment, supplies, animals, plants, feed, fertilizer, etc., on hand at the beginning and close of the project. All materials, food, fabric, plants, animals and equipment bought after project begins should be listed under Expenses. If you sell something from your inventory, be sure to list it under Income.

NAME OR DESCRIPTION OF ITEM	A. BEGINNING OF PROJECT			B. COMPLETION OF PROJECT		
	Number or amount	Price Each	Total Value	Number or amount	Price Each	Total Value

TOTAL                          OPENING INVENTORY VALUE \_\_\_\_\_                          TOTAL

CLOSING INVENTORY VALUE \_\_\_\_\_

# Income and Expense Project Record

INCOME			
Date	Number and/or Description of Income	\$/Unit	Total \$
<b>Grand Total Amount of Income From Project:</b>			<b>\$</b>

EXPENSES			
Date	Number and/or Description of Expenses	Cost/Unit	Total Cost
<b>Grand Total Cost/Expense From Project:</b>			<b>\$</b>

**TOTAL PROFIT OR LOSS FROM THIS PROJECT: \$** \_\_\_\_\_  
 (To compute total profit, subtract grand total expenses from grand total income)

**Visual Identification of Markings, Leg Bands, Patterns**

(Attach Photo or draw animal. Add multiple pages for multiple animals)

***SMALL STOCK MEDICAL HEALTH RECORD***

Date	Leg Band #	Activity	Product	Amt	Person Who Administered	W/drawl Days	Days From Fair



### SMALL STOCK FEEDING RECORD

(to be completed monthly or at every change of feed/feeding)

Date	Feed Name	% CP	Amt. Fed	Supplements	% CP	Amt. Fed

# Financial Summary

## Income

Closing inventory B..... (1) \$ \_\_\_\_\_

Income..... (2) \$ \_\_\_\_\_

Total Income (add lines 1 + 2 = 3) (3) \$ \_\_\_\_\_

## Expenses

Opening Inventory A..... (4) \$ \_\_\_\_\_

Expenses..... (5) \$ \_\_\_\_\_

Total Expenses (add lines 4 + 5 = 6) (6) \$ \_\_\_\_\_

Results of my financial investment (Subtract line 3 - 6 = 7) (7) \$ \_\_\_\_\_

How did you pay for this project? \_\_\_\_\_

\_\_\_\_\_

Now that you have completed the financial summary, what did you learn? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How does this influence what you do next year?

\_\_\_\_\_

\_\_\_\_\_

What would you do differently? \_\_\_\_\_

# Project Accomplishments

To be completed as goals are completed.

**Did you accomplish your goals? Why or why not? (include skills learned)**

**Recognition received in this project**

**Will you take this project next year? Why?**

**If you answered "Yes," What would you like to learn next year?**

# Thinking back on your year in this 4-H project...

At the end of your 4-H year, use this form to see what you might learned along the way. For example, as a result of your work in this project this year, did you learn how to use your time better? If so, you would indicate this in answer to question #3 below.

Follow the instructions below to complete this section.

**Think back on your past year in this 4-H project. Below are listed some skills that you may have developed as a result of your 4-H involvement. Over in the columns to the right, rate yourself on these skills at the beginning of the 4-H year, and then now at the end of the year.**

**Back . . . at the beginning of the 4-H year when I first enrolled in this 4-H project**

**Now . . . after I have participated in this 4-H project for the year**

	CIRCLE ONE NUMBER FOR EACH STATEMENT				CIRCLE ONE NUMBER FOR EACH STATEMENT			
	No	Sometimes	Usually	Yes	No	Sometimes	Usually	Yes
1. Think about what might happen because of my choices.	1	2	3	4	1	2	3	4
2. Plan how to use my financial resources.	1	2	3	4	1	2	3	4
3. Use my time wisely.	1	2	3	4	1	2	3	4
4. Treat people who are different from me with respect.	1	2	3	4	1	2	3	4
5. Organize a group to meet its goal.	1	2	3	4	1	2	3	4
6. Contribute as a member of a team.	1	2	3	4	1	2	3	4
7. Accept responsibility for doing a job.	1	2	3	4	1	2	3	4
8. Choose activities that promote physical health.	1	2	3	4	1	2	3	4
9. Avoid risky behaviors.	1	2	3	4	1	2	3	4
10. Understand it is important to follow through on commitments I have made.	1	2	3	4	1	2	3	4



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