Ear Tag #

|  |  |  |
| --- | --- | --- |
| **Check One:**[ ] 4-H[ ]  FFAExhibitor age as of September 1 of this school year[ ] Junior (8 – 10) [ ] Intermediate (11 – 13) [ ] Senior (14 – 18) | **Check One:** [ ]  Lamb  [ ]  Steer  [ ] Swine [ ] Goat | **Check One:**[ ]  Submitting for fair entry only[ ]  Submitting for judging (record book awards and premiere exhibitor) |



## **Market Animal Record Book**

|  |  |
| --- | --- |
| Exhibitor Name:         | Date of Birth       |

Mailing Address:

City: FL Zip Code:

Club or Chapter Name:

Number of years in this project, including this year:

I hereby certify that I am the exhibitor of this project. I have personally been responsible for the care of this (these) animal(s), have personally kept records on this project, and have personally completed this record book.

 Exhibitor’s Signature Date

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I, the exhibitor’s parent (or guardian), certify that my child has completed this project and this record book and will comply with all the Rules & Regulations of this show and the Southeastern Youth Fair.

|  |  |
| --- | --- |
| Type Parent’s/Guardian’s Name:      | Phone Number:       |
|  |  |

 **Parent’s/Guardian’s Signature Date** |

|  |
| --- |
| This exhibitor is an active member of this 4-H Club or FFA Chapter, and is eligible to show at the Southeastern Youth Fair. I verify this record book and the required demonstration have been completed. This is an accurate representation of this exhibitor’s project and has been completed by the exhibitor.Leader’s/Advisor’s Signature Date |

|  |
| --- |
| DRUG STATEMENTI hereby certify that any drug, antibiotic or biological substance which may have been administered by myself, or any other person, was done so in strict compliance with the manufacturers’ label requirements or as prescribed by a veterinarian.Signature of Exhibitor: Signature of Parent/Guardian:  |

##### PURPOSE

The purpose of an animal youth project is to achieve the following:

1. To acquire an understanding of the animal industry by preparing for purchasing, caring for, and keeping records on one or more animals.
2. To be able to identify the types and grades of animals and employ

efficient methods of marketing.

1. To understand the business aspects and economics of purchasing

animals, feeds, facilities, and equipment for an animal project.

1. To develop integrity, sportsmanship, and cooperation.
2. To develop leadership abilities, build character, and assume citizenship responsibilities.

##### GOALS

Choose several goals for your project. Goals should be established at the beginning of your project. They should be challenging, yet attainable. Goals should include all aspects of your project. At the close of the project, the achievements should be compared with your goals.

[ ]  Raise my animal(s) to completion and exhibit at the fair.

[ ]  Attempt to make a profit on my animal(s) when sold at market price.

[ ]  Have my animal(s) meet industry standards for the ideal market animal.

[ ]  Learn how to groom and clip my project animal(s).

[ ]  Take full responsibility for fitting and showing of my animal(s).

[ ]  Complete my record book to the best of my ability.

[ ]  Market my project in a professional manner.

[ ]  Complete a demonstration or presentation on my project.

 **(REQUIRED FOR ALL EXHIBITORS.)**

(Reference your demonstration for project photo 6)

##### AGREEMENT/RESPONSIBILITY

This project begins on       (dates listed on SEYF website) for a period of     days

 **(MM/DD/YYYY)**

by and between the following interested parties and covers the student’s enterprises in

this project.

This agreement contains statements concerning responsibility for providing equipment, land, buildings, capital, and management; and the percent that is the student’s share for each enterprise.

|  |
| --- |
| 1. Exhibitor will provide the following:      Exhibitor is to receive:      Signature of Exhibitor: \_\_\_\_\_ |

|  |
| --- |
| 2. Parent or ‘other party’ agrees to provide:      Parent or ‘other party’ is to receive:      Signature of Parent or ‘Other Party’: \_\_\_\_\_  |

|  |
| --- |
| 3. Responsibility of Advisor or Leader:      Signature of Leader or Advisor: \_\_\_\_\_\_\_ |

**INVENTORY PAGE**

 An inventory, at the start and the close of the project, is a necessary part of the record keeping. It is a record of everything you have before you start your project, those items you purchase or receive (items given or donated still have a value) during your project and what you have on hand at the end or the project. Beginning inventory values are either: 1) the amount paid, or the estimated value if donated and, 2) in those cases where equipment was not purchased, but was already on hand, the estimated market value, or your ending value from previous year. Your actual cost for the year will be the total amount of depreciation.

|  |  |
| --- | --- |
| Project Start Date        | Project End Date       |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1****Equipment** | **2****Quantity** | **3****Beginning****Value**(Ending value from previous year or cost if purchased this year) | **4****Depreciation**(10% of beginning value) | **5****Ending****Value**(Column 3 minus column 4) |
| Example:**Feeder** | **1** | **$4.95** | **$.50** | **$4.45** |
|  |  |  |  |  |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|  | **Sub Totals** | **3.**       | **4.**       | **5.**       |

**INVENTORY, Continued**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1****Equipment** | **2****Quantity** | **3****Beginning****Value**(Ending value from previous year or cost if purchased this year) | **4****Depreciation**(10% of beginning value) | **5****Ending****Value**(Column 3 minus column 4) |
| **Sub Totals from previous page** |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
| **TOTALS** | **3.**       | **4.**       | **5.**       |

**MISCELLANEOUS EXPENSES**

(Consumable Items - NOT FEED)

 Miscellaneous expenses include your **MARKET ANIMAL**, medicines, veterinary charges, fly spray, straw, bedding, show entry fees, membership dues, etc. Homegrown or donated animals have a value, use market value at the time of acquisition.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1****Date** | **2****Item** | **3****Quantity** | **4****Price****Per Item** | **5****Total** **Cost** |
| Example:**12/10/16** | **Bedding/Shavings** | **2** | $ **4.50** | $ **9.00** |
|  |  |  |  |  |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
| **Sub Total** | **5.**      |

**MISCELLANEOUS EXPENSES, Continued**

(Consumable Items - NOT FEED)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1****Date** | **2****Item** | **3****Quantity** | **4****Price****Per Item** | **5****Total** **Cost** |
| **Sub Total from previous page:** | $       |
|  |  |  |  |  |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
| **Total** | **5.**       |

**FEED EXPENSES ONLY**

(Grain, minerals, supplements, etc., units are lbs., bags, bales)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1****Date** | **2****Expense Items** | **3****Quantity****and Unit** | **4****Price****Per Unit** | **5****Total****Expense** |
| example:**11/20/14** | **Feed Description** | **2 - 50lb bag** | $ **6.49** | $ **12.98** |
|  |  |  |  |  |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|  | **Sub Totals** | **N/A** | **N/A** | **5.**      |

**FEED EXPENSES, Continued**

(Grain, minerals, supplements, etc., units are lbs., bags, bales)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1****Date** | **2****Expense Items** | **3****Quantity****and Unit** | **4****Price****Per Unit** | **5****Total****Expense** |
|  |  |  |  |  |
| **Sub Totals from previous page** | **N/A** | $       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |        |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  |       |       |       |       |
|  | **TOTALS** | **N/A** | **N/A** | **5.**       |

##### ANIMAL HEALTH RECORD

List all medical procedures on your animal(s) including preventative measures as well as treatment for illness or injury. Include all medications given. Be sure to include any medications given by the SEYF at weigh in/ tagging this information in listed on the SEYF website. If your project did not require any medical treatments please write none in the first box.

|  |  |  |
| --- | --- | --- |
| **Treatment Date:**EXAMPLE: 12/04/16 | **Reason:****De-worming** | **Withdrawal Period:****30 days** |
| **Animal ID:****#123 – Taffy** | **Treatment and/or Medications Given:**Safe Guard Pellet | **Administrator’s Name:****Mr. Smith** |
| **Treatment Date:**      | **Reason:**      | **Withdrawal Period:**      |
| **Animal ID:**      | **Treatment:**      | **Administrator’s Name:**      |
| **Treatment Date:**      | **Reason:**      | **Withdrawal Period:**      |
| **Animal ID:**      | **Treatment:**      | **Administrator’s Name:**      |
| **Treatment Date:**      | **Reason:**      | **Withdrawal Period:**      |
| **Animal ID:**      | **Treatment:**      | **Administrator’s Name:**      |
| **Treatment Date:**      | **Reason:**      | **Withdrawal Period:**      |
| **Animal ID:**      | **Treatment:**      | **Administrator’s Name:**      |
| **Treatment Date:**      | **Reason:**      | **Withdrawal Period:**      |
| **Animal ID:**      | **Treatment:**      | **Administrator’s Name:**      |
| **Treatment Date:**      | **Reason:**      | **Withdrawal Period:**      |
| **Animal ID:**      | **Treatment:**      | **Administrator’s Name:**      |

TAG NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exhibitor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4H Club/FFA Chapter\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Select one: \_\_\_ Junior (8-10) \_\_\_ Intermediate (11-14) \_\_\_ Senior (14-18)

##### DUE AT FINAL WEIGH IN

##### PROJECT SUMMARY

##### Total Pounds Gained:       lb -       lb =       lb

#####  (Ending Weight) (Beginning Weight) (Total Pounds Gained)

Rate of Gain per Day:  lb **÷**  **=** lb

#####  (Total Pounds Gained) (Total Days on Feed) (Rate of Gain per Day)

Feed Conversion:  lb **÷** lb **=** lb

#####  (Total Pounds Fed) (Total Pounds Gained) (Feed Conversion)

##### FINANCIAL SUMMARY

**Expenses**:

Transfer totals from pages 6, 8 & 10.

Ending Total Depreciation – page 6, #4 $      \_\_

Total Miscellaneous Expense – page 8 $      \_\_

Total Feed Expense – page 10 $      \_\_

TOTAL INVESTMENT: $      \_\_

**Income:**

     \_\_ **x $**      \_\_ **= $**      \_\_

 (Final Weight) (Current Market Price) (Market Value of Animal)

# Preliminary Profit/Loss of Project: $      \_\_

# (Market Value of Animal Less Total Investment) (show + or -)

##### STORY

Your story should make a point, have interesting facts and experiences that give the judge an understanding of what you did and learned with this project. Please make sure you use correct grammar, spelling, and punctuation. The story length requirements for each age division are listed below. Please make sure your story meets the minimum requirements.

**Story Length Requirements:**

*Any typed stories must be single spaced 12 point font*

Juniors: 1 full page typed or 1.5 pages handwritten

Intermediate: 1.5 pages typed or 2 full pages handwritten

Senior: 2 full pages typed or 2.5 pages handwritten

**Lamb, Steer, Swine, and Goat**

**Junior, Intermediate and Senior:** As with any story, you should tell about things you did, experienced, or learned by participating in 4-H/FFA and the SEYF. Your story should make a point, have interesting facts or experiences that give the judges an understanding of what you did and learned with this project. Remember grammar, spelling and neatness will be observed by the judges.

You can use the following statements to help you outline your story:

* Introduce yourself. Include why you joined 4-H/FFA and/or chose the project that you did.
* Tell about things you enjoyed learning or doing.
* Tell about results, difficulties, or challenges you had.
* Explain how you would improve your project.
* Tell what you learned about yourself through this experience.
* Explain how you could use the life and/or project skills you learned in other areas of your life.

**SIX Project Photos**

Each photo should contain a brief educational caption. Photos should cover the complete project period from beginning to end and show the work being completed. Project demonstration MUST be referenced for picture 6.

**PHOTO ONE**

|  |
| --- |
|  |

**Caption:**

**PHOTO TWO**

|  |
| --- |
|  |

**Caption:**

**PHOTO THREE**

|  |
| --- |
|  |

**Caption:**

**PHOTO FOUR**

|  |
| --- |
|  |

**Caption:**

#####

**PHOTO FIVE**

|  |
| --- |
|  |

**Caption:**

#####

**PHOTO SIX: *Project Demonstration***

|  |
| --- |
|  |

**Caption:**

**STEER / LAMB / SWINE SHOW AND SALE**

**BIDDER / BUYER VISITATION FORM**

In keeping with the rules and regulations of the Southeastern Youth Fair Steer/Lamb/Swine Show, I have written or visited the following potential buyers for the 2023 Auction.

(Make additional copies as needed)

**NEW BUYERS:** (Minimum of 3)

|  |  |  |  |
| --- | --- | --- | --- |
| DATECONTACTED | BUSINESS NAME | CONTACT ORINDIVIDUAL’S NAME | Method of contact ex. Phone, letter, visit |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

**PREVIOUS BUYERS:** (Minimum of 2)

|  |  |  |  |
| --- | --- | --- | --- |
| DATECONTACTED | BUSINESS NAME | CONTACT ORINDIVIDUAL’S NAME | Method of contact ex. Phone, letter, visit |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

The Southeastern Youth Fair reserves the right to verify all information on this form and/or contact any business or person on this list.

|  |
| --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Exhibitor’s Signature Date**  |

**MUST INCLUDE A COPY OF YOUR BUYER LETTER AND**

**DRAFT BUYER THANK YOU LETTER.**

## **Southeastern Youth Fair**

**Market Record Book Score Sheet**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Total Point Value** | **Scored points** | **Judges Comments** |
| **Completeness/ Neatness** |  |  |  |
| All Signatures | 5 |  |  |
| Visitation Form | 2 |  |  |
| BUYER Letter Copy | 4 |  |  |
| THANK YOU Letter DRAFT | 4 |  |  |
| Neatly Bound/ Clean Copy | 5 |  |  |
| Script | 5 |  |  |
| **Section Total** | **25** |  |  |
|  |  |  |  |
| **Accuracy** |  |  |  |
| Inventory Page | 10 |  |  |
| Market Animal Inventory (listed on misc.exp)  | 3 |  |  |
| Miscellaneous Expenses | 5 |  |  |
| Feed Expenses | 8 |  |  |
| Animal Health | 4 |  |  |
| Financial Summary **DUE AT FINAL WEIGH IN** | 5 |  |  |
| **Section Total** | **35** |  |  |
|  |  |  |  |
| **Evidence of Work** |  |  |  |
| Project Story | 25 |  |  |
| **SIX** Pictures with educational captions | 12 |  |  |
| Required Project Demonstration in photos | 3 |  |  |
| **Section Total** | **40** |  |  |
|  |  |  |  |
| **Total** | **100** | \_\_\_\_\_\_ |  |

**Ribbon Sticker Awarded: Blue: 90-100 Red: 80-89 White: 70-79**

**69 and under – No ribbon sticker**