



LASALLE COUNTY COMMERCIAL HEIFER RECORD BOOK 2021-2022

NAME: _____

CLUB: _____

EXPENSES – PROJECT INVESTMENTS

Complete the following summary for Heifers purchased.

ID or TAG#	SEX	BREED	BIRTH DATE	PURCHASE DATE	PURCHASE PRICE
TOTAL PRICE					
AVERAGE PRICE					

PASTE PHOTO OF HIEFERS AT PURHASE or UP TO WEIGH-IN DATE

EXPENSES – FEED

Provide all feed, grain, protein supplement, minerals, and hay purchased for your project.

Keep all your receipts.

[illegible]

EXPENSES – ANIMAL HEALTH

Complete the following chart of animal health services. A copy of payment receipts should follow this page in the record book.

DATE	DESCRIPTION	QUANTITY	COST
TOTALS			

EXPENSES – ADDITIONAL COST

Complete the following chart of miscellaneous expenses you incur throughout your project.

Maintain the receipts for your records.

DATE	DESCRIPTION	QUANTITY	COST
TOTALS			

ACTIVITIES WITH YOUR PROJECT

In the table below, list the activities you attended during the project year. These include workshops, mini-camps, country shows, fairs, etc.

EVENT NAME	LOCATION	RESULTS

PASTE PHOTO OF PROJECT HERE

PROJECT SUMMARY INFORMATION

Pen of 3hd/ 4hd

Per Head

Cost of Project		
Cost of Feed		
Animal Health Cost		
Additional Cost		
Expense Totals		
Expense Totals Excluding Heifers		
Number of days in project. (119) <small>(Initial Weigh Date to Final Record Weigh Date)</small>		
Final Record Weight		
Initial Weight		
Total LBS Gained		
Average Daily Gain <small>(Total Gain/Number days in project)</small>		
Cost of Gain <small>(Total Expenses/Total LBS Gained)(Excluding Heifers)</small>		
Break Even Amount		

REQUIRED SIGNATURES

Date of Report Completion: _____

Exhibitor's Name (Print): _____

Exhibitor's Address: _____

Exhibitor's Phone: _____

Exhibitor's Date of Birth: _____

Years in 4-H or FFA: _____

Exhibitor's Signature: _____

Parent or Guardian's Name (Print): _____

Parent's Signature: _____

Advisor's Name (Print): _____

Advisor's Signature: _____

Club Name: _____