



4-H
Earn-An-Animal



Cornell Cooperative Extension | Fulton and Montgomery Counties

FOR EARN-AN-ANIMAL _____ PROJECT

Project dates: Start: May 1st, 2024 Completion: September 30th, 2024

**Earn-An-Animal records documented in this book are required for the full duration of the time frame listed above.*

Member's Name

Member's Full address

4-H Age

Years in 4-H

Years in this Project

Name of 4-H Club

***4-H Youth Signature**

***Leaders Signature**

***Earn-An-Animal Mentor Signature**

Animal Information

List the animal you will raise for Earn-An-Animal

NAME	ID#	BREED	BIRTH DATE

Additional Animal Information: _____

Ration

Describe your original feeding ration. **Attach feed tags.**

***Describe any changes you made to this original ration and why they were made.**

Weekly Feed Costs

Include costs for all feeds, whether raised or bought. Separate sheet may be used for details.
 Chart must be completed for entirety of the program. Estimate cost of homegrown feeds.

Feed Types:	Grain		Hay		Supplements		Totals (per month)	
	Lbs.	Cost	Lbs.	Cost	Lbs.	Cost	Overall Lbs	Overall Cost
MAY 1 st -5 th								
MAY 6 th -12 th								
MAY 13 th -19 th								
MAY 20 th -26 th								
MAY 27 th -JUNE 2 nd								
JUNE 3 rd -9 th								
JUNE 10 th -16 th								
JUNE 17 th -23 rd								
JUNE 24 th -30 th								
JULY 1 st -7 th								
JULY 8 th -14 th								
JULY 15 th -21 st								
JULY 22 nd -28 th								
JULY 29 th - AUG 4 th								
AUG 5 th -11 th								
AUG 12 th -18 th								
AUG 19 th -25 th								
AUG 26 th – SEPT 1 st								
SEPT 2 nd -8 th								
SEPT 9 th -15 th								
SEPT 16 th -22 nd								
SEP 23 rd -30 th								
Totals:	Lbs	\$	Lbs	\$	Lbs	\$	Lbs	\$

All Other Costs

Include all bedding costs, vet fees, registration costs, animal loss and any other expenses related directly to your project animal.

DATE	DESCRIPTION OF COST	COST \$	DATE	DESCRIPTION OF COST	COST \$
* TOTAL			* TOTAL		

Total Other Costs =

Health Management

Include all worming, implants, docking, etc... related directly to your project animal.

NAME/ID	TREATMENT	DATE	NAME/ID	TREATMENT	DATE

Project Income

Include all income (if any) related directly to your project animal.

DATE	DESCRIPTION OF INCOME	AMOUNT \$	DATE	DESCRIPTION OF INCOME	AMOUNT \$
* TOTAL			* TOTAL		

THE BOTTOM LINE!

Figuring Your Project Cost:

Beginning Cost of Your Project Animal(s)	_____
+ Total Feed Costs (see page 3)	_____
+ Total All Other Costs (see page 4)	_____
TOTAL PROJECT EXPENSE	_____
List Project Income (see page 5)	+ _____
Total Project Expense	- _____
Total Profit or Loss	_____

Total project Profit or Loss _____

