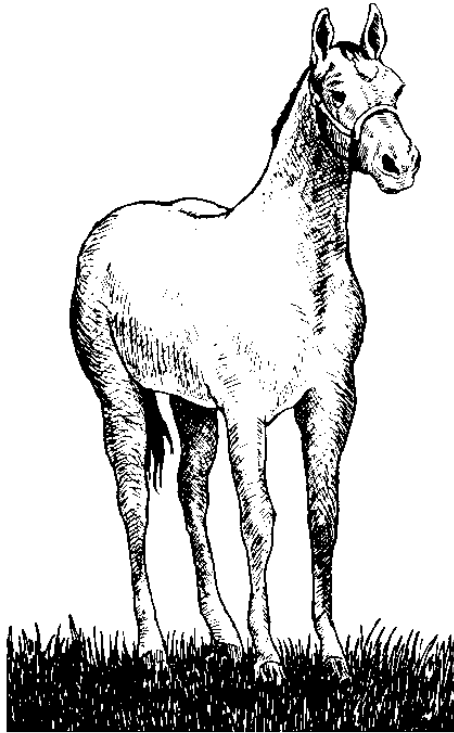


# MORGAN COUNTY 4-H HORSE PROJECT RECORD BOOK



Name \_\_\_\_\_ Age as of January 1 \_\_\_\_\_

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

**DO NOT USE 3-RING BINDERS OR ANY TYPE OF COVER.  
DO NOT ADD ANY ADDITIONAL LITERATURE OR PAGES.**

*It is required that this record book be hand written, preferably in pencil, can use ink*

**Livestock/Horse programs enable youth to gain skills in**

- ◆ Math
- ◆ Business
  - by understanding and recording expenses and receipts
- ◆ Critical thinking and decision-making by recording and maintaining records of animal health.
- ◆ Writing and communication
- ◆ Horse care, production and management

**In order to attain these skills, youth will**

- ◆ Record expense and income derived from the horse project
- ◆ Figure cost of feed
- ◆ Record animal health actions
- ◆ Record general activities
- ◆ Answer project questions and/or write a project story
- ◆ Include photographs

**Prepared by Marlin Eisenach**

**Morgan County Extension Agent, Livestock, 4-H**

**2008**

# Feeding Record

	<i>Grain</i>			<i>Hay</i>		
Month	Kind	Amt (lb)	Cost	Kind	Amt (lb)	Cost
Aug						
Sep						
Oct						
Nov						
Dec						
Jan						
Feb						
Mar						
Apr						
May						
Jun						
Jul						
<b>Total Cost</b>			<b>\$</b>			<b>\$</b>

	<i>Pasture</i>		<i>Bedding</i>		<i>Boarding</i>	
Month	Kind	Cost	Kind	Cost	Kind	Cost
Aug						
Sep						
Oct						
Nov						
Dec						
Jan						
Feb						
Mar						
Apr						
May						
Jun						
Jul						
<b>Total Cost</b>		<b>\$</b>		<b>\$</b>		<b>\$</b>

\* Total Grain, Hay, Pasture, Bedding, Boarding.

\* Total Cost of Feed \$ \_\_\_\_\_ \*

Transfer this figure to Item Number 3 on page 6.

# Equipment Inventory

Item	Purchase Price	Expected to last How many years	Equipment cost per year**
Saddles			
Bridles			
Saddle Blanket			
Saddle Pads			
Halter			
Lead Shank			
Lunge Line			
Tie Down			
Running Martingale			
Bitting Ring			
Tail Set			
Harness			
Winter Blanket			
Cooler			
Hoof Pick			
Hoof Knife			
Hoof Nippers			
Hoof Rasp			
Brush			
Currycomb			
Mane-Tail Comb			
Sweat Scraper			
Shedding Blade			
Sponge			
Leg Wraps			
Bucket			
Feed Tub			
Clippers			
Whip			
Splint Boots			
Quarter Boots			
Supplies:			
Other:			

**Total Equipment Cost this Year \$** \_\_\_\_\_

*Transfer this figure to Item Number 4 on page 6.*

*\*Divide purchase price by the number of years the item is expected to last.*



# Farrier Record

Date	Trim	Shoe	Reset	Cost

**Total Farrier Service Cost \$** \_\_\_\_\_

*Transfer this figure to Item Number 6 on page 6.*

What size shoe does your horse wear? \_\_\_\_\_

Did your horse experience thrush, hoof wall cracks, or any other foot problem? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List the various tools a farrier would use and the purpose of each

<i>Tool</i>	<i>Purpose</i>

# Income

## Shows

Date	Item	Quantity	Total Cost
	<b>Transfer Total Cost to Number 1, Page 6</b>	<b>Total Cost</b>	<b>\$</b>

## Miscellaneous

Date	Item	Quantity	Total Cost
4-15-06	<i>Sample</i> Drove Cattle for Neighbor	2 hrs	25.00
	<b>Transfer Total Cost to Number 2, Page 6</b>	<b>Total Cost</b>	<b>\$</b>

# Other Expenses

## Shows

Date	Item	Quantity	Total Cost
	<b>Transfer Total Cost to Number 7, Page 6</b>	<b>Total Cost</b>	<b>\$</b>

## Miscellaneous

Date	Item	Quantity	Total Cost
	<b>Transfer Total Cost to Number 8, Page 6</b>	<b>Total Cost</b>	<b>\$</b>

# Financial Summary

## Income

Obtain from Income Page 5

Item #	Income	Amount
1	Shows	
2	Miscellaneous	
	<b>Total</b>	\$

## Expenses

Obtain from Expenses Pages 1-5

Item #	Expense	Amount
3	Feed	
4	Equipment	
5	Health Care	
6	Farrier Services	
7	Shows	
8	Miscellaneous	
	<b>Total</b>	\$

Total Income \$ \_\_\_\_\_

Total Expenses \$ \_\_\_\_\_

# Riding Log

Record all noncompetitive riding done for pleasure and/or training on your project horse(es). Time spent may be recorded as a total for the day, week or month.

<b>Date</b>	<b>Comments about your Activities</b>	<b>Time Spent (hrs)</b>
August		
September		
October		
November		
December		
January		

# Riding Log

<b>Date</b>	<b>Comments about your Activities</b>	<b>Time Spent (hrs)</b>
February		
March		
April		
May		
June		
July		
	<b>TOTAL ALL MONTHS</b>	

# General Activities

Responsibilities in the local club organization this year:

Office held this year:

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Committee(s) served on as chairman or member:

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	<b>Club/Community</b>	<b>County</b>	<b>State</b>	<b>Regional</b>	<b>National</b>
Exhibit	_____	_____	_____	_____	_____
Camp	_____	_____	_____	_____	_____
Field Day	_____	_____	_____	_____	_____
Demonstration	_____	_____	_____	_____	_____
Judging	_____	_____	_____	_____	_____
Project Tour	_____	_____	_____	_____	_____
Achievement Program	_____	_____	_____	_____	_____
Jr. Leadership Training	_____	_____	_____	_____	_____
Project Workshop	_____	_____	_____	_____	_____
Other (list)	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

Choose one of the activities listed above and give details about your participation.

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# Project Evaluation

**What do you consider most successful about your project this year?**

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**What did you enjoy most about the project?**

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**What did you learn from the project this year?**

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**Did you have any problems? What were they?**

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**If you were to repeat the project, what would you do differently?**

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4-H Member

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Parent/Gaurdian  
*I have reviewed this record*

# Photos

(On this page, label, date and caption no more than 4 photographs)