



Feed Schedule & Instructions / Maintenance Record

A.M. (Included): _____

Lunch (Optional/Add'l): _____

P.M. (Included): _____

Feed suppliers can/will vary based on quality and availability. Feed changes are done gradually, when possible.

Special Instructions: _____

Document the date shoes, wormers, teeth and vaccinations are given on the calendar below:

- 2010 -

Jan	Feb	Mar	Apr	May	Jun
<input type="checkbox"/> shoes	<input type="checkbox"/> shoes	<input type="checkbox"/> shoes	<input type="checkbox"/> shoes	<input type="checkbox"/> shoes	<input type="checkbox"/> shoes
<input type="checkbox"/> wormer	<input type="checkbox"/> wormer	<input type="checkbox"/> wormer	<input type="checkbox"/> wormer	<input type="checkbox"/> wormer	<input type="checkbox"/> wormer
<input type="checkbox"/> teeth	<input type="checkbox"/> teeth	<input type="checkbox"/> teeth	<input type="checkbox"/> teeth	<input type="checkbox"/> teeth	<input type="checkbox"/> teeth
<input type="checkbox"/> vaccination(s)	<input type="checkbox"/> vaccination(s)	<input type="checkbox"/> vaccination(s)	<input type="checkbox"/> vaccination(s)	<input type="checkbox"/> vaccination(s)	<input type="checkbox"/> vaccination(s)
<input type="checkbox"/> illness	<input type="checkbox"/> illness	<input type="checkbox"/> illness	<input type="checkbox"/> illness	<input type="checkbox"/> illness	<input type="checkbox"/> illness
Jul	Aug	Sep	Oct	Nov	Dec
<input type="checkbox"/> shoes	<input type="checkbox"/> shoes	<input type="checkbox"/> shoes	<input type="checkbox"/> shoes	<input type="checkbox"/> shoes	<input type="checkbox"/> shoes
<input type="checkbox"/> wormer	<input type="checkbox"/> wormer	<input type="checkbox"/> wormer	<input type="checkbox"/> wormer	<input type="checkbox"/> wormer	<input type="checkbox"/> wormer
<input type="checkbox"/> teeth	<input type="checkbox"/> teeth	<input type="checkbox"/> teeth	<input type="checkbox"/> teeth	<input type="checkbox"/> teeth	<input type="checkbox"/> teeth
<input type="checkbox"/> vaccination(s)	<input type="checkbox"/> vaccination(s)	<input type="checkbox"/> vaccination(s)	<input type="checkbox"/> vaccination(s)	<input type="checkbox"/> vaccination(s)	<input type="checkbox"/> vaccination(s)
<input type="checkbox"/> illness	<input type="checkbox"/> illness	<input type="checkbox"/> illness	<input type="checkbox"/> illness	<input type="checkbox"/> illness	<input type="checkbox"/> illness