## MY CAT'S DATA SHEET

Registered name:								
Nickname:								
Obtained from:	Address:	·.						
Breed: Birthdate:								
Distinguishing featu	res, to help identify if lost:	:						
Weight:	Height:	Length:						
Ears:	Eyes:							
	License No.:							
How many litters(if	a female)							
MEDICAL HISTORY: Veterinarian's Name:								
Address:	Telephone:							
Record of Examination	Reason							
Shots or Inoculation	ns: Date:	S						
Feline Distemper								
URI								
Rabies Worming								
Castrated	Date							
Spayed	Date							
Bred	Date							
Kittened	Date							

## EXPENSE RECORD

(Food, litter, veterinary services, equipment purchased, etc.)

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## SHOW RECORD

Date	Show	Class	No. in Class	Placing
				-

## GUIDE FOR HOME INSPECTION OF CATS IN 4-H PROJECTS

Name of Member:	Name of Cat:				
Club:		_lst Date	e:	_2nd Date:	3rd Date:
Inspections should be project leader. The fresponsibility of the	irst in	spection	hree time should l	es during the oe made within	4-H year by the one month after
Defeate to Observe		ection Da		-	•
Points to Check  CONDITION OF COAT G-Good, F-Fair	lst	2nd	3rd	Rem	arks
P-Poor					
CONDITION OF EYES C-Clear, CL-Cloudy D-Discharge					
CONDITION OF EARS C-Clean, D-Dirty I-Inflamed					
CONDITION OF BODY N-Normal, O-Obese T-Thim					
CONDITION OF TEETH C-Clean, S-Stained T-Tartar, B-Broken					
COLOR OF GUMS Pink -Healthy Pale - Anemic					
LEG STRUCTURE S-Straight D-Deformed					
TEMPERMENT F-Friendly, S-Shy A-Aggressive					