EmailMemm

Top of Form

**GFM**

* Name

 First Last

* Date Time

 MM/ DD/ YYYY..

* MILK CHECK INFO

|  |  |
| --- | --- |
| **Milk Check Date** |  |
| **Total Pounds Sold** |  |
| **Fat Pounds Sold** |  |
| **Protein Pounds Sold** |  |
| **Fat Income** |  |
| **Protein Income** |  |
| **Other Solid Income** |  |
|  |  |
| **Quality Premium** |  |
| **Other Premium** |  |
| **Other Premium** |  |
| **CWT Deduction** |  |
| **Hauling and Transportation** |  |
| **Coop Dues** |  |
|  |  |
| **Somatic Cell Count** |  |
| **BPC (Raw Count)** |  |
| **MUNs** |  |

* FARM AND LIVESTOCK DATA
* Labor Hours To Produce Forage, Care of Dairy Animals and Milk Production

|  |  |
| --- | --- |
| **Paid** |  |
| **Unpaid** | Answer should be in hours. |

* Herd Inventory

|  |  |
| --- | --- |
| **Lactating Cows** |  |
| **Dry Cows** |  |
| **Heifers Not fed milk**  **Calves Being Fed Milk** |  |

* Cows

|  |  |
| --- | --- |
| **Sold for Beef** |  |
| **Died** |  |
|  |  |
| **Sold Other** |  |

* Youngstock

|  |  |
| --- | --- |
| **Culls/Deaths Less than 3 months old** |  |
| **Culls/Deaths More than 3 months old** |  |

* Other

|  |  |
| --- | --- |
|  |  |
|  |  |
| **Animals Fresh** |  |

* MONTHLY RATION DATA
* Farm Raised Forages: Pounds fed/day OR Volume n( Bales, cart full, or bucket full) Minus Refusal

|  |  |
| --- | --- |
| **1st Cutting Baleage** |  |
| **2nd Cutting Baleage** |  |

* Purchased Forages: Pounds fed/day

|  |  |
| --- | --- |
| **1st Cutting Dry Hay** |  |
| **2nd Cutting Dry Hay** |  |



Bottom of Form