

THE DAIRY GOAT SOCIETY OF WESTERN AUSTRALIA

HERD IMPROVEMENT SCHEME

DAY SHEET – TO BE COMPLETED BY OWNER

OWNERS NAME.....DATE.....

TIME - 1ST MILKING.....2ND MILKING.....

WEATHER..... MONITOR.....

| Bottle No | Name of Doe | Tattoo | Date Kided | AM | PM | Total |
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FOR 24 HOUR TESTS - SUPERVISED STRIP OUT

TIME.....MONITORS SIGNATURE.....

Please complete form on the day of testing and send to :

State Milk Awards Officer
Mrs Michelle Sonogo, PO Box 52, Mundijong WA 6123