

Project B Photos



Project B Health Record

In the table below, include the date given, medication given, the withdrawal time (if applicable), and cost of medicine.

<i>Date</i>	<i>Product Name and Purpose for Use</i>	<i>Dosage</i>	<i>E. Cost</i>
	E. Total Health Cost		

Project B Show Records

Any shows that you have registered for, **including but not limited to**, Indian River County Fire Fighters' Fair. You will record the registration fee and any premiums you may have earned at the show.

<i>Date</i>	<i>Name of Show</i>	<i>F. Registration Fee</i>	<i>G. Premiums Earned</i>
	Totals	F.	G.



Project C Photos



Project C Health Record

In the table below, include the date given, medication given, the withdrawal time (if applicable), and cost of medicine.

<i>Date</i>	<i>Product Name and Purpose for Use</i>	<i>Dosage</i>	<i>E. Cost</i>
	E. Total Health Cost		

Project C Show Records

Any shows that you have registered for, **including but not limited to**, Indian River County Fire Fighters' Fair. You will record the registration fee and any premiums you may have earned at the show.

<i>Date</i>	<i>Name of Show</i>	<i>F. Registration Fee</i>	<i>G. Premiums Earned</i>
	Totals	F.	G.



Project D Photos



Project D Health Record

In the table below, include the date given, medication given, the withdrawal time (if applicable), and cost of medicine.

<i>Date</i>	<i>Product Name and Purpose for Use</i>	<i>Dosage</i>	<i>E. Cost</i>
	E. Total Health Cost		

Project D Show Records

Any shows that you have registered for, **including but not limited to**, Indian River County Fire Fighters' Fair. You will record the registration fee and any premiums you may have earned at the show.

<i>Date</i>	<i>Name of Show</i>	<i>F. Registration Fee</i>	<i>G. Premiums Earned</i>
	Totals	F.	G.



Project E Photos



Project E Health Record

In the table below, include the date given, medication given, the withdrawal time (if applicable), and cost of medicine.

<i>Date</i>	<i>Product Name and Purpose for Use</i>	<i>Dosage</i>	<i>E. Cost</i>
	E. Total Health Cost		

Project E Show Records

Any shows that you have registered for, **including but not limited to**, Indian River County Fire Fighters' Fair. You will record the registration fee and any premiums you may have earned at the show.

<i>Date</i>	<i>Name of Show</i>	<i>F. Registration Fee</i>	<i>G. Premiums Earned</i>
	Totals	F.	G.

