Farm _____

PigCHAMP® Knowledge Software

FARROW / WEAN RECORD

Period _____ to _____
Page _____ of _____

	Sow ID	Farrow Date	Born Alive	Stillborn	Mummified	Litter Wt.	Litter ID	Assisted	Induced	Location			Foster		Foster Reason	Nurse		Part Wean			Wean			Wean Destination			Group ID
										Barn	Room	Pen/ Crate	Date	# On/Off		Date	# On/Off	Date	Piglets	Wt.	Date	Piglets	Wt.	Barn	Room	Pen	
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SAMPLE

Foster Reasons (1) Litter Size (2) Pig Wt. (3) Poor Sow

PigCHAMP Form SB4 (NCR) - 1/01

DO NOT DUPLICATE

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