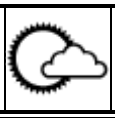
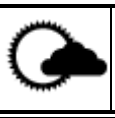
Hive Number/ID: **Date:**

Queen	Y	N	W	Y	R	G	B
QCs	Y	N					

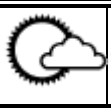
Brood	Y	N	Eggs	Larvae	Capped
Frames	1	2	3	4	5
	6	7	8	9	10

Varroa	Count				
Stores	1	2	3	4	5
Frames	6	7	8	9	10
Feed	Y	N			
Detail					

Supers	Y	N	ON	OFF	
No.					

Inspection and steps taken

Hive Number/ID: **Date:**

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No.					

Inspection and steps taken

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		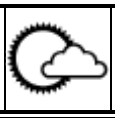	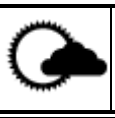		

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		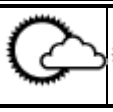			

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Inspection and steps taken