

WEEKLY MARINE MAMMAL REPORT

Page ___ of ___

VESSEL NAME

PERMIT NUMBER

IRCS

WEEK ENDING
MONTH/DAY

CONDITION CODES

- 1. KILLED DURING CAPTURE
- 2. INJURED DURING CAPTURE
- 3. DEAD BEFORE CAPTURE (DECOMPOSED)
- 4. UNINJURED

RECORD THE CATCH OF INDIVIDUAL ANIMALS UNLESS TWO OR MORE WERE TAKEN TOGETHER AND WERE IN THE SAME CONDITION

DATE (MM/DD)	LATITUDE (DEGREES)	LONGITUDE (DEGREES)	SPECIES CODE	STATUS CODE	NUMBER	FLAG

DESIGNATED REPRESENTATIVE _____ DATE _____

Public reporting burden for this collection of information is estimated to average 6 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to Bob Dickinson, NMFS International Affairs, 1315 East-West Highway, Room , Silver Spring, MD 20910.

Data submitted based on this information collection will be accorded confidentiality pursuant to 50 CFR Part 600, Subpart E. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.