

Northwest Trawl Catch Shares

Observer and Catch Monitor Contact Information Form

Observer Provider Submission Date:

Full Name (F, MI, L)

NW ID # Home Port

Street Address

City

State: Zip Code

Cell Phone Number:

Home Phone Number:

Full Name (F, MI, L)

NW ID # Home Port

Street Address

City

State: Zip Code

Cell Phone Number:

Home Phone Number:

Full Name (F, MI, L)

NW ID # Home Port

Street Address

City

State: Zip Code

Cell Phone Number:

Home Phone Number:

Full Name (F, MI, L)

NW ID # Home Port

Street Address

City

State: Zip Code

Cell Phone Number:

Home Phone Number:

Full Name (F, MI, L)

NW ID # Home Port

Street Address

City

State: Zip Code

Cell Phone Number:

Home Phone Number:

Full Name (F, MI, L)

NW ID # Home Port

Street Address

City

State: Zip Code

Cell Phone Number:

Home Phone Number:

If you have questions, contact Rebecca Hoch (206) 437-2415, Rebecca.Hoch@noaa.gov

Public reporting burden for this collection of information is estimated to average 5 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 Janell majewski, NWFSC, 2725 Montlake Blvd, East, Seattle, Washington 98112. 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.