## **Federal Subsistence Customary Trade Record Keeping Form**

OMB Control No. 1018-0075

Description:					Season:			
Applicant's	Name (First, Middle	Initial, Last)	Date of Birth	Permit #				
Mailing Address				Physical Address				
City, State, Zip Code				Community of Primary Residence				
AK Drivers	License # or other a	none Number(s)	Date Permit Issued (mm/dd/yy)					
Applicant'	s Signature	- I		Issuing A	Agent (Print)	)		
I certify that I a	am a rural resident as define	ed by 50 CFR 100.4 and 36 CF	R 242.4. I have read and					
understand th	e conditions on the permit	and agree to comply with th	nem and applicable					
regulations as	found in 50 CFR 100 and 36	CFR 242.						
Househo	old members designa	ted to fish with this P	ermit (must be Fede	rally-qualifie	d subsistend	ce users)		
Name DOB Name				DOB				
Name		DOB DOB	Name Name			DOB		
			Name					
Fodoral C								
rederal S	ubsistence Fishing P	ermit # for Applicant:						
	bsistence Fishing P		Check here if no sale		Report D	ue by:		
	osistence Customary	Trade Report	Check here if no sale	s took place	nber of Total Fis		- Dollar Amount	
Federal Sul	osistence Customary			s took place			- Dollar Amount	
Federal Sul	osistence Customary	Trade Report	Check here if no sale	s took place	nber of Total Fis	sh:	- Dollar Amount	
Federal Sul	osistence Customary	Trade Report	Check here if no sale	s took place	nber of Total Fis	sh:	- Dollar Amount	
Federal Sul	osistence Customary	Trade Report	Check here if no sale	s took place	nber of Total Fis	sh:	- Dollar Amount	
Federal Sul	osistence Customary	Trade Report	Check here if no sale	s took place	nber of Total Fis	sh:	- Dollar Amount	
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Federal Sul	osistence Customary	Trade Report	Check here if no sale	s took place	nber of Total Fis	sh:	- Dollar Amount	
Federal Sul	osistence Customary	Trade Report	Check here if no sale	s took place	nber of Total Fis	sh:	- Dollar Amount	
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Federal Sul	osistence Customary	Trade Report	Check here if no sale	s took place	nber of Total Fis	sh:	- Dollar Amount	
Federal Sul	osistence Customary	Trade Report	Check here if no sale	s took place	nber of Total Fis	sh:	- Dollar Amount	

In accordance with the Privacy Act (5 U.S.C. 552a) and the Paperwork Reduction Act (44 U.S.C. 3501), please note the following information. This information collection is authorized by the Alaska National Interest Lands Conservation Act and associated regulations. The Federal Subsistence Board will use this information to manage fish and wildlife resources for subsistence uses. It is our policy not to use your name for any other purpose. We will maintain this information in accordance with the Privacy Act. Your response is voluntary, but is required to obtain or retain a benefit. We may not conduct or sponsor and you are not required to respond to an information collection unless it displays a currently valid OMB control number. OMB has approved this information collection and assigned OMB Control No. 1018-0075. We estimate it will take you about 15 minutes to complete the application and record your harvest. This burden estimate includes time for reviewing instructions, gathering data, and completing and reviewing the form. You may direct comments regarding the burden estimate or any other aspect of the form to the Service Information Collection Clearance Officer, Fish and Wildlife Service, Mail Stop 2042-PDM, Arlington Square, Department of the Interior, 1849 C Street, NW., Washington D.C. 20240.

Permit Conditions:			
Fold on this line (second) - After m	aking the folds, tape this flap to the bottom of the letter, making sure that the return address is visible	Э.	
Fold on this line (first)		111111	
Return Address			NO POSTAGE NECESSARY IF MAILED
		111111	IN THE UNITED STATES
	BUSINESS REPLY MAIL		
	FIRST CLASS MAIL PERMIT NO. 12874 ANCHORAGE AK		
	POSTAGE WILL BE PAID BY ADDRESSEE		
	Address		
	Post Office Bar Code		