

**SCRIPT FOR FWS EMPLOYEES TO USE FOR
COLLECTING INFORMATION ON EXPERIMENTAL POPULATIONS**

[NOTE: You **MAY NOT** collect any information other than that approved under OMB Control Number 1018-0095.]

Thank you for contacting us. My name is _____ and I am a (position) _____ with the U.S. Fish and Wildlife Service's (office) _____ in (location) _____.

We have established experimental populations for some listed species as a tool for creating additional populations to protect the species against a catastrophic loss (due to a hurricane for example). It is important that we have information on any injuries, mortalities (including human-related), recovery of dead specimens, animal husbandry actions necessary to manage the population, and other types of take (including harm or harassment). The Code of Federal Regulations (50 CFR Subpart H) contains our regulations on experimental populations. In addition, you can find information governing experimental populations at <http://www.fws.gov/endangered>.

We may not conduct or sponsor and you do not have to respond to a collection of information unless it displays a currently valid Office of Management and Budget control number. The Office of Management and Budget has reviewed and approved our request to collect information on the take of members of experimental populations. The OMB Control Number is 1018-0095, which expires **[Insert Date]**. We use this information to:

- Document the locations of reintroduced animals;
- Improve management techniques for reintroduction of listed species;
- Determine causes of illness, injury, and mortality;

- Evaluate conflict with human activities so that we can minimize conflicts with people and livestock; and to
- Assess the effectiveness of control activities to reduce problems where depredation is an issue.

We estimate that it will take most people no more than 30 minutes to provide this information, which includes time for gathering and maintaining the information. You may send comments on any aspect of this information collection to the Service Information Collection Clearance Officer, Division of Policy, Performance, and Management Programs, (MS: BPHC), 5275 Leesburg Pike, Falls Church, Virginia 22041.

You should be aware that the information you provide may be referred to our law enforcement officers for further investigation. Please tell me:

- Your name, address, and phone number.
- Species involved.
- Type of incident.
- Quantity of take (under the ESA ‘take’ includes harm, harass, and nonlethal activities that may harm the listed species) involved.
- Location and time of reported incident.
- Description of the circumstances related to the incident.

[Service employee: Provide any instructions to the reporting party, such as procedures for waiting for APHIS assessment of livestock damages.]

Thank you for providing this information. If you have any questions or need more information, please contact me at (telephone number)_____.