

Vessel Name _____

Departure: Date _____
 Month Day Year

Time _____
 Local – 24-hour

Port _____

Federal Document No _____

Return: Date _____
 Month Day Year

Time _____
 Local – 24-hour

Port _____

Crew Size (including Captain) _____

Trip # _____

EFP trip (check if yes)

EM (check if yes)

Observed trip (check if yes)

Buyer(s) _____

Tow #	DATE mo/day		TIME Local 24-hour clock	LATITUDE		LONGITUDE		Average depth of catch (fathoms)	NET TYPE	Target Strategy	Estimated pounds retained each tow – enter 3 or 4-letter code from species code list												
				Degrees	Minutes	Degrees	Minutes																
1		set			.		.																
		up			.		.																
2		set			.		.																
		up			.		.																
3		set			.		.																
		up			.		.																
4		set			.		.																
		up			.		.																
5		set			.		.																
		up			.		.																
6		set			.		.																
		up			.		.																
7		set			.		.																
		up			.		.																
8		set			.		.																
		up			.		.																
9		set			.		.																
		up			.		.																

REMARKS:

Signed: _____

FISH TICKET NUMBER

TO BE COMPLETED BY AGENCY

VESSEL
PORT