



## 20XX Marine Recreational Fishing Expenditure Survey Highly Migratory Species

We would like to know about your most recent day of marine recreational fishing for highly migratory species.

- **“Marine”** means SALTWATER or any portion of a bay, sound, or river that is saltwater or brackish water.
- A **day of HMS fishing** is *any portion of a day* spent fishing for **highly migratory species** (HMS).
- **HMS species include TUNA, SWORDFISH, SHARKS, MARLIN, SAILFISH, or SPEARFISH.**
- Except when asked, please do not include any information for other household members or other fishing party members.

**1. In 20XX**, in what month was your most recent day of HMS fishing ? Month \_\_\_\_\_

**2. During your most recent day of HMS fishing in 20XX**, did you primarily fish from a:  
*(please indicate your primary trip type by making an “X” in **one** box only)*

Party or charter boat   
  Private boat   
  Shore, pier, or jetty

**3. On this day**, what city or town was closest to the place where you launched a boat, cast a line from shore, or boarded a party or charter boat? City or town: \_\_\_\_\_ State \_\_\_\_\_

**4. What were the primary and secondary species of HMS you were targeting on this trip?**

\_\_\_\_\_    \_\_\_\_\_     Whatever I can catch  
 Primary    Secondary

**5. Including yourself**, how many people traveled with you to your most recent day of marine fishing ?

   Number of people, including yourself

**6. Of the people who traveled with you**, how many people were fishing **including yourself**?

   Number of people, including yourself

**7a.** On your most recent day of HMS fishing, did you spend one or more nights away from your permanent or seasonal residence?

Yes (**GO TO QUESTION 7b**)     No (**SKIP TO QUESTION 8**)

**7b.** How many nights did you spend away from home?  Number of nights

**7c.** How many days on this trip did you go fishing?  Number of days

**7d.** What was the **primary** purpose of this entire trip away from home? *(mark one box)*

Fishing                             
  Vacation or personal reasons                             
  Business

**8. During the past 12 months**, how many total days did you go fishing for **HMS**?

*(enter zero if you had no HMS trips)*

   Number of days

9. On your most recent day of **HMS** fishing, how much did you **PERSONALLY** spend for the following items? If your most recent day was part of a longer trip away from home, please provide your expenses for the entire trip. Include expenses that you paid for others, but do not include any expenses paid by others for you. For each item, indicate the percentage of your expense that was spent in the state where you were fishing. **If you spent nothing, please write "0" for that item.**

(A) Type of Expense	(B) Your Personal Expense (Round to the nearest dollar)	(C) % Spent in the State of Your Most Recent Day of HMS Fishing (0-100%)
Food and drink from grocery or convenience stores	\$ _____ .00	_____ %
Food and drink from restaurants and bars	\$ _____ .00	_____ %
Parking, site access fees, and tolls	\$ _____ .00	_____ %
Auto, truck, or RV fuel	\$ _____ .00	_____ %
Auto, truck, or RV rental	\$ _____ .00	_____ %
Bait	\$ _____ .00	_____ %
Ice	\$ _____ .00	_____ %
Boat fuel and oil	\$ _____ .00	_____ %
Boat rental	\$ _____ .00	_____ %
Party, charter, or guide tickets and surcharges	\$ _____ .00	_____ %
Galley tab & souvenirs bought on charter/party boat	\$ _____ .00	_____ %
Fish filleting fee and/or Tips paid to charter crew	\$ _____ .00	_____ %
Lodging (hotels, motels, campgrounds, etc.)	\$ _____ .00	_____ %
Public transportation (bus, train, taxi, ferry, etc.)	\$ _____ .00	_____ %
Airfare	\$ _____ .00	_____ %
Gifts or souvenirs	\$ _____ .00	_____ %
Processing, freezing, or shipping fee paid to fish processing company	\$ _____ .00	_____ %

If you had none of the above expenses, check here:

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0648-0693. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 8 minutes per response, including the time for reviewing instructions and completing and reviewing the information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the NOAA Fisheries Service at: 1315 East-West Hwy., Silver Spring, MD 20910, Attn: Sabrina Lovell, sabrina.lovell@noaa.gov.