

	SPECIES NAME (Fish and Invertebrates)	Sp. Code	Units 1. Ton 2. Lbs 3. Single Purse Seine Only	Total	DISPOSITION			DAMAGED	MM DAMAGED
					Kept	Returned			
						Alive	Dead		
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

Notes:

Gear and Set Data ~ Drift Net

TRIP NUMBER.

--	--	--	--	--	--	--	--	--	--	--	--

SET NUMBER

--	--

PULL DATE (YYYY MM DD)

--	--	--	--	--	--	--

Percentage of Net Observed

--	--	--	--	--

 %

Target Sp. 1

--	--	--

Target Sp. 2

--	--	--

1) _____

2) _____

Position Type

--	--	--

1- Loran 3- Satellite
2- DR 4- Verbal

Latitude

--	--	--	--	--	--	--	--	--	--

Deg. Min.

Longitude

--	--	--	--	--	--	--	--	--	--

Deg. Min.

Environment

--	--	--

1- Inshore of Kelp 4- No Kelp
2- In Kelp 5- Unknown
3- Outside of Kelp

Begin Set

Latitude

--	--	--	--	--	--	--	--	--	--

Deg. Min.

Longitude

--	--	--	--	--	--	--	--	--	--

Deg. Min.

End Set

Latitude

--	--	--	--	--	--	--	--	--	--

Deg. Min.

Longitude

--	--	--	--	--	--	--	--	--	--

Deg. Min.

Begin Pull

Ship Activity

--	--	--

1- Pull / Reset 4- Tend Only
2- Pull / Move / Reset 5- Net Lost
3- Pull / Bring In

Set Date (MM DD)

--	--	--	--

Begin Set Time

--	--	--	--

Water Depth

--	--	--	--	--

 fms

Beaufort

--

Water Temp.

--	--	--	--	--

Temp. Type

--	--

1- Spirit 2- Mercury
3- Digital 4- Vessel
5- Other

Cloud Cover

--

Number of Lightsticks

--	--

Floatline Pingers

--	--

Distance to Floatline

--	--	--

 ft

Pinger Type

--	--	--	--

1- Dukane 3- Fumunda
2- Other 4- Mixed

Leadline Pingers

--	--

Distance to Leadline

--	--	--

 ft

Pinger Type

--	--	--	--

1- Dukane 3- Fumunda
2- Other 4- Mixed

Begin Pull Time

--	--	--	--

Water Depth

--	--	--	--	--

 fms

Beaufort

--

Water Temp.

--	--	--	--	--

Cloud Cover

--

Main Engine (Y/N)

--

Generator (Y/N)

--

Sonar (Y/N)

--

Deck Light (Y/N)

--

Patrol Net (Y/N)

--

Soak Total

--	--	--	--

 hrs

Lost Netting

--	--	--	--	--

 fms

Pingers Functioning (Y/N)

--

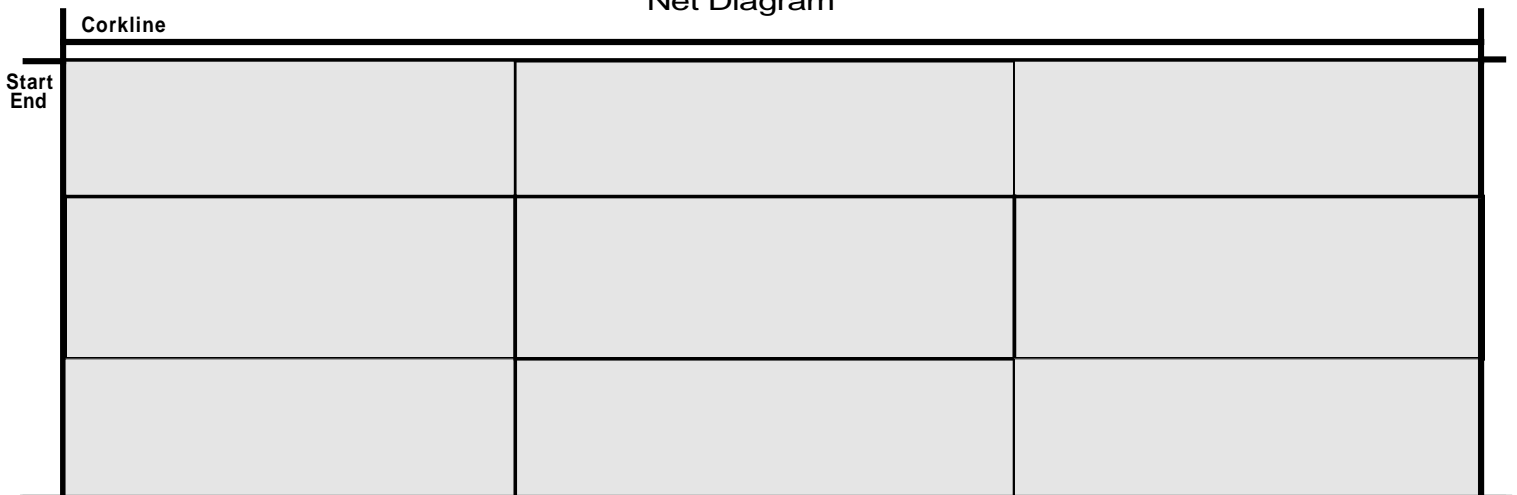
Notes:

Net Characteristics

Section #	Total Sections	Percent of Net	Net type	Net Material
<input type="text"/> <input type="text"/> OF <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> 1 - Set 2 - Drift 3 - Float	<input type="text"/> 4 - Trammel, 1 panel 5 - Trammel, 2 panel 6 - Trammel, 3 panel
Strength	Strength Code	Net Length	Net Depth	
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> 1 - Lb. Test 2 - Twine Size	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> fms	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> meshes	
Net Color	Mesh Size	Extender Length		
<input type="text"/> 1 - Green 4. Brown 2. Red 5. Other 3. Blue	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ins	<input type="text"/> <input type="text"/> ft		
Hanging Line Material	Percent Slack	Number of Meshes Hanging	Hanging Length	
<input type="text"/> 1 - Synthetic 2 - Natural	<input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> ins	

Section #	Total Sections	Percent of Net	NetType	Net Material
<input type="text"/> <input type="text"/> OF <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/> 1 - Set 2 - Drift 3 - Float	<input type="text"/> 4 -Trammel, 1 panel 5 - Trammel, 2 panel 6 - Trammel, 3 panel
Strength	Strength Code	Net Length	Net Depth	
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> 1 - Lb. Test 2 - Twine Size	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> fms	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> meshes	
Net Color	Mesh Size	Extender Length		
<input type="text"/> 1- Green 4. Brown 2. Red 5. Other 3. Blue	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ins	<input type="text"/> <input type="text"/> ft		
Hanging Line Material	Percent Slack	Number of Meshes Hanging	Hanging Length	
<input type="text"/> 1 - Synthetic 2 - Natural	<input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> ins	

Net Diagram



Notes:

MARINE MAMMAL LIFE HISTORY FORM

NOAA FORM 88-

SPECIMEN # 1 7

CARD 1 CRUISE # 13 16 YR 17 MO 19 DAY 21 SET # 23 25 LATITUDE 29 N/S 1 LONGITUDE 36 E/W 2

SPECIES: _____ SEX: M F 40 39

LENGTH (cm) 41 44 CURVILINEAR? Y N 45 GIRTH (cm) 46 49 FLIPPER LENGTH (cm) 50 52

LACTATING?: Y N 53 FETUS: M F 54 FETUS LENGTH (cm) 55 58 CURVILINEAR? Y N 59

WERE THESE COLLECTED?:

YES NO	<input type="checkbox"/> <input type="checkbox"/>	CARCASS	60	<input checked="" type="checkbox"/>	YES NO	<input type="checkbox"/> <input type="checkbox"/>	HEAD	61	<input checked="" type="checkbox"/>	YES NO	<input type="checkbox"/> <input type="checkbox"/>	TEETH	62	<input checked="" type="checkbox"/>
	<input type="checkbox"/> <input type="checkbox"/>	STOMACH	63	<input checked="" type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	BLUBBER	64	<input checked="" type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	BIOPSY	65	<input checked="" type="checkbox"/>
	<input type="checkbox"/> <input type="checkbox"/>	OVARIES	66	<input checked="" type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	FETUS	67	<input checked="" type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	FETUS BIOPSY	68	<input checked="" type="checkbox"/>
	<input type="checkbox"/> <input type="checkbox"/>	TESTIS	69	<input checked="" type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	ADRENALS	70	<input checked="" type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/>	OTHER	71	<input checked="" type="checkbox"/>
	<input type="checkbox"/> <input type="checkbox"/>	PHOTOS	72	<input checked="" type="checkbox"/>	COMMENTS: _____									

DIAGNOSTIC CHARACTERISTICS: _____ SKETCH THE ANIMAL: _____

1
2
3
4
5

N FIELD ↑
↓ LAB

CARD 2

8	9	15	21	27	33	39 Ln (mm)	SG	E
TOTAL WEIGHT (gm)	L GONAD w/epi (gm)	L GONAD w/o epi(gm)	R GONAD w/epi (gm)	R GONAD w/o epi(gm)	RIGHT TESTIS			

44	47	50	51	53	55	57	59	61	63	65	67	69	71	73	75
TUBULE DIAM (µm)	FOLL DIAM (mm)	CL	C.L. DIAMS. (mm)			C.A. IN LEFT OVARY			C.A. IN RIGHT OVARY						

CARD 3

8	9	5	11	6	13	15	17	TOT	19	20	26	27	30	1	33	2
CA. IN RT. OV.	CA (L)	CA (R)	CORP	PG	FETUS WEIGHT (gm)	MD	GLGs	ADRENAL WTS (gm)								
		C.A.+C.L.														

C.A. diams. (mm) by Type

1	2	3	4	5	6

NOTES:

Non-Fish Tally Sheet

TRIP NUMBER

		-			-				
--	--	---	--	--	---	--	--	--	--

SET NUMBER

--	--

	Species Name	Sp. Code	Location (GN Only)		Condition	Sex	Specimen Number	Tag Y/N	Pinger Distance (ft)	Pinger Type	Pinger Location	Pinger Functioning (Y/N)	Notes
			H	V									
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													
16													
17													
18													
19													
20													

<u>Location</u>	<u>Condition</u>	<u>Sex</u>	<u>Pinger Type</u>	<u>Pinger Location</u>
1 - First 3rd/upper 3rd	D - Dead	M - Male	1 - Dukane	1 - Floatline
2 - Middle 3rd	A - Alive	F - Female	2 - Other	2 - Leadline
3 - Final 3rd/lower 3rd	I - Injured	U - Unknown	3 - Fumunda	
4 - Unknown	U - Unknown			

	Species Name	Sp. Code	Location (GN Only)		Condition	Sex	Specimen Number	Tag Y/N	Pinger Distance (ft)	Pinger Type	Pinger Location	Pinger Functioning (Y/N)	Notes
			H	V									
21													
22													
23													
24													
25													
26													
27													
28													
29													
30													
31													
32													
33													
34													
35													
36													
37													
38													
39													
40													

Location

- 1 - First 3rd/upper 3rd
- 2 - Middle 3rd
- 3 - Final 3rd/lower 3rd
- 4 - Unknown

Condition

- D - Dead
- A - Alive
- I - Injured
- U - Unknown

Sex

- M - Male
- F - Female
- U - Unknown

Pinger Type

- 1 - Dukane
- 2 - Other
- 3 - Fumunda

Pinger Location

- 1 - Floatline
- 2 - Leadline

SEA TURTLE LIFE HISTORY FORM

SET #

DATE (YYYY, MM, DD)

TRIP -

SPECIMEN **T**

LATITUDE

LONGITUDE

SPECIES:

OLIVE RIDLEY [LV]

GREEN / BLACK [CM]

LEATHERBACK [DC]

HAWKSBILL [ET]

LOGGERHEAD [CC]

UNIDENTIFIED [LIT]

IDENTIFICATION:

NUMBER OF: LEFT COSTAL SCUTES

RIGHT COSTAL SCUTES

VERTEBRAL SCUTES

INFRAMARGINAL SCUTES

OVERLAPPING SCUTES? YES[1] NO [2] UNK[3]

INFRAMARGINAL PORES? YES[1] NO [2] UNK[3]

1 PAIR PREFRONTAL SCALES? YES[1] NO [2] UNK[3]

LACKS BONY SHELL? YES[1] NO [2] UNK[3]

DORSAL COLORATION: ORANGE / RED [1] GRAYISH [2] UNK / OTHER [3]

DIMENSIONS (cm):

CARAPACE LENGTH (curved)

CARAPACE WIDTH (curved)

TAIL LENGTH

POSITION IN NET:

HORIZONTAL

VERTICAL

[1] FOUND IN FIRST THIRD OF NET

[1] FOUND IN UPPER THIRD OF NET

[2] FOUND IN MIDDLE THIRD OF NET

[2] FOUND IN MIDDLE THIRD OF NET

[3] FOUND IN FINAL THIRD OF NET

[3] FOUND IN LOWER THIRD OF NET

[4] POSITION UNKNOWN

[4] POSITION UNKNOWN

TAGS:

1. TAGS PRESENT WHEN CAPTURED: YES NO UNK PLASTIC [1]
[1] [2] [3] METAL [2]

TAG # TAG # TAG(S) REMOVED?

YES NO

[1] [2]

ADDRESS: _____

2. TAGS APPLIED BY OBSERVER: YES NO PLASTIC [1]
[1] [2] METAL [2]

TAG # TAG #

CONDITION OF TURTLE:

PREVIOUSLY DEAD [1]

RELEASED UNHARMED [2]

RELEASED INJURED [3]

KILLED ACCIDENTALLY [4]

ESCAPED FROM NET [5]

TREATED AS CATCH [6]

OTHER / UNKNOWN [7]

DESCRIBE ANY INJURIES RESULTING FROM INCIDENTAL CAPTURE OR 'OTHER' CONDITION:

YES NO [1] [2] _____

PHOTOS Taken?

SAMPLES COLLECTED? YES [1] NO [2] (describe on back)

NOTES: Use back of form for notes on any abnormalities, diseases, epibiota, signs of shark attack and the diagnostic characteristics observed when identifying specimens not brought aboard.

Sighting Record

TRIP NUMBER
[][] - [][] - [][][][]

SIGHTING #
[][]

DATE (YYYY MM DD)
[][][][] [][][] [][][]

SET NUMBER
[][]

Position - Latitude
[][] [][][] [][]
Deg. Min.

Position - Longitude
[][][] [][][] [][]
Deg. Min.

Loran:

Time Begin
[][][][]

Time End
[][][][]

Vessel Activity
[]
1- Net Retrieval
2- Net Set
3- Drifting
4- Motoring

- 5- Other
6- Trolling
7- Pole & Line

Gear Encounter (Y/N)
[]

Closest Distance to Vessel
[][][] Meters

Closest Distance to Gear
[][][] Meters

Deterrent(s) Used (Y/N)
[] Fire arm

[] Seal Bomb

[] Other

Species 1

Species Name

Sp. Code
[][]

Best Estimate
[][][][]

High
[][][][]

Low
[][][][]

Injured
[][][]

Dead
[][][]

List Identifying Characteristics:

Sketch Identifying Characteristics:

Narrative:

Species 2

Species Name

Sp. Code

--	--

Best Estimate

--	--	--	--

High

--	--	--	--

Low

--	--	--	--

Injured

--	--	--

Dead

--	--	--

List Identifying Characteristics:

Sketch Identifying Characteristics:

Species 3

Species Name

Sp. Code

--	--

Best Estimate

--	--	--	--

High

--	--	--	--

Low

--	--	--	--

Injured

--	--	--

Dead

--	--	--

List Identifying Characteristics:

Sketch Identifying Characteristics:

Additional Notes / Sketches:

Gear and Set Data ~ Set Net

TRIP NUMBER

		-		-					
--	--	---	--	---	--	--	--	--	--

SET NUMBER

--	--

PULL DATE (YYYY MM DD)

--	--	--	--	--	--	--

Percentage Net Observed

--	--	--	--

 %

Target Sp. 1

--	--	--	--

Target Sp. 2

--	--	--	--

1) _____

2) _____

Begin Pull Position

Latitude

Deg.		Min.					

Longitude

Deg.		Min.					

Position Type

1- Loran		3- Satellite	
2- DR		4- Verbal	

Environment

1- Inshore of Kelp		4- No Kelp	
2- In Kelp		5- Unknown	
3- Outside of Kelp			

Orientation to Shore

1- Parallel		4- Unknown	
2- Perpendicular			
3- Diagonal			

Distance Offshore

					nms

Set Date (MM DD)

--	--	--	--

Begin Set Time

--	--	--	--

Begin Pull Time

--	--	--	--

Water Depth

fms				

Beaufort

--

Water Temp.

--	--	--	--	--

Type

1- Spirit
2- Mercury
3- Digital
4- Vessel
5- Other

Number of Pingers

--	--

Pinger Type

1- Netmark 1000
2- Other
3- Fumunda
4- Mixed

Water Depth Final

fms				

Ship Activity

1- Pull / Reset	4- Tend Only
2- Pull / Move/Reset	5- Net Lost
3. Pull / Bring In	

Soak Total

hrs			

Lost Netting

fms				

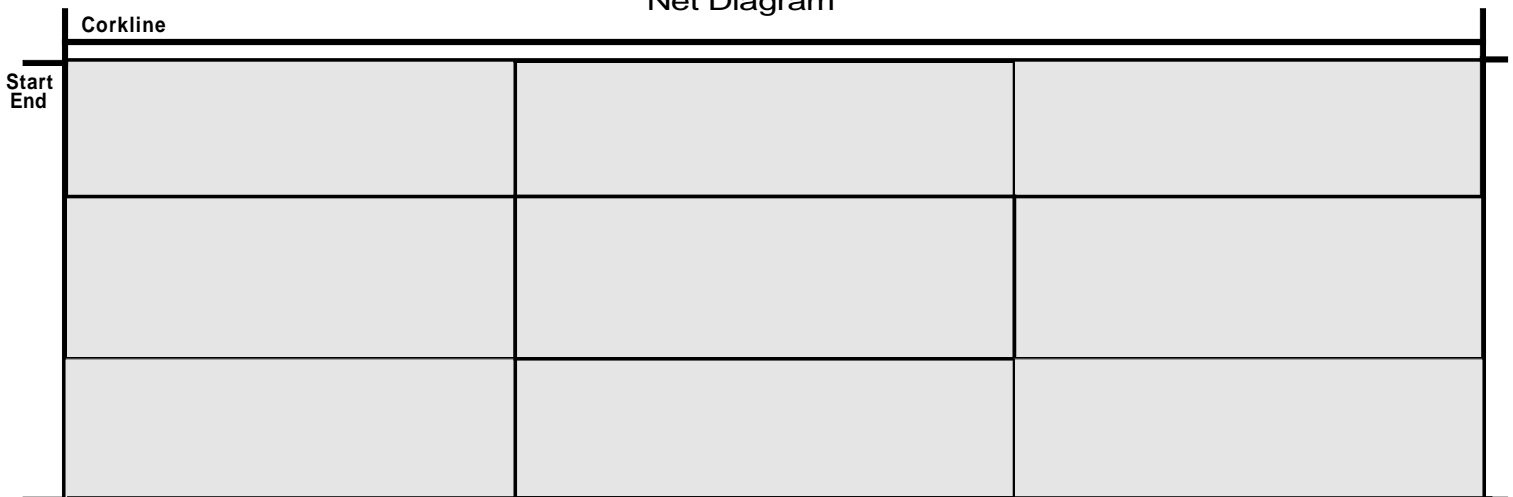
Notes:

Net Characteristics

Section #	Total Sections	Percent of Net	Net Type		Net Material
<input type="text"/> <input type="text"/> OF <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/>	1 - Set 2 - Drift 3 - Float 4 - Trammel, 1 panel 5 - Trammel, 2 panel 6 - Trammel, 3 panel	<input type="text"/>
Strength	Strength Code		Net Length		Net Depth
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	1 - Lb. Test 2 - Twine Size	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> fms		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> meshes
Mesh Size	Mesh Size (Multi-Panel Trammel Only)		Suspender Length		
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ins	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ins		<input type="text"/> <input type="text"/> ft		
Hanging Line Material	Percent Slack	Number of Meshes Hanging	Hanging Length		
<input type="text"/>	<input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> ins		

Section #	Total Sections	Percent of Net	Net Type		Net Material
<input type="text"/> <input type="text"/> OF <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %	<input type="text"/>	1 - Set 2 - Drift 3 - Float 4 - Trammel, 1 panel 5 - Trammel, 2 panel 6 - Trammel, 3 panel	<input type="text"/>
Strength	Strength Code		Net Length		Net Depth
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	1 - Lb. Test 2 - Twine Size	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> fms		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> meshes
Mesh Size	Mesh Size (Multipanel Trammel Only)		Suspender Length		
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ins	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ins		<input type="text"/> <input type="text"/> ft		
Hanging line Material	Percent Slack	Number of Meshes Hanging	Hanging Length		
<input type="text"/>	<input type="text"/> <input type="text"/> %	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> ins		

Net Diagram



Notes:

**TRIP DATA SUMMARY
(Captain's Copy)**

		-			-				
--	--	---	--	--	---	--	--	--	--

Observer Name _____

Operator _____

Vessel Name _____

Date Depart _____

Port Depart _____

Date Arrive _____

Port Arrive _____

Days at Sea _____

No. of Sets _____

No. MM's Brought Aboard _____

No. Whole MM's Brought Back _____

Protected Species Counts

	CETACEANS	PINNIPEDS	OTTERS	TURTLES	BIRDS
ALIVE					
DEAD					
INJURED					
UNKNOWN					

Submitted as Accurate _____

9/06

----- FOLD AND SEPARATE HERE -----

**TRIP DATA SUMMARY
(Office Copy)**

		-			-				
--	--	---	--	--	---	--	--	--	--

Observer Name _____

Operator _____

Vessel Name _____

Date Depart _____

Port Depart _____

Date Arrive _____

Port Arrive _____

Days at Sea _____

No. of Sets _____

No. MM's Brought Aboard _____

No. Whole MM's Brought Back _____

Protected Species Counts

	CETACEANS	PINNIPEDS	OTTERS	TURTLES	BIRDS
ALIVE					
DEAD					
INJURED					
UNKNOWN					

Submitted as Accurate _____

9/06

TRIP SPECIFICATIONS RECORD

TRIP NUMBER. <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	OBSERVER # <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	VESSEL NAME <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	VESSEL LENGTH <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>
--	--	---	---

VESSEL ID # <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	STATE PLATE # <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	OPERATOR NAME <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>
---	---	---

Observation Type (GILLNET ONLY) <input type="checkbox"/> 1. Pre-net-set <input type="checkbox"/> 2. S/ Post-net-set <input type="checkbox"/> 3- R/ Post-net-set <input type="checkbox"/> 4. Other	<input type="checkbox"/> 1- On Board <input type="checkbox"/> 2- From Other Vessel	<u>DEPARTURE</u>	PORT <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	DATE (YYYY MM DD) <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	TIME (HH MM) <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>
---	---	-------------------------	--	---	--

PORT STOPS

BEGIN DATE (YYYY MM DD)	TIME (HH MM)	PORT	END DATE (YYYY MM DD)	TIME (HH MM)
<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>
<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>
<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>
<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>
<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>

	PORT <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	DATE (YYYY MM DD) <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	TIME (HH MM) <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>
--	--	---	--

ARRIVAL

COMMENTS

LARGE WHALE INTERACTION FORM

TRIP # _____

SET # __

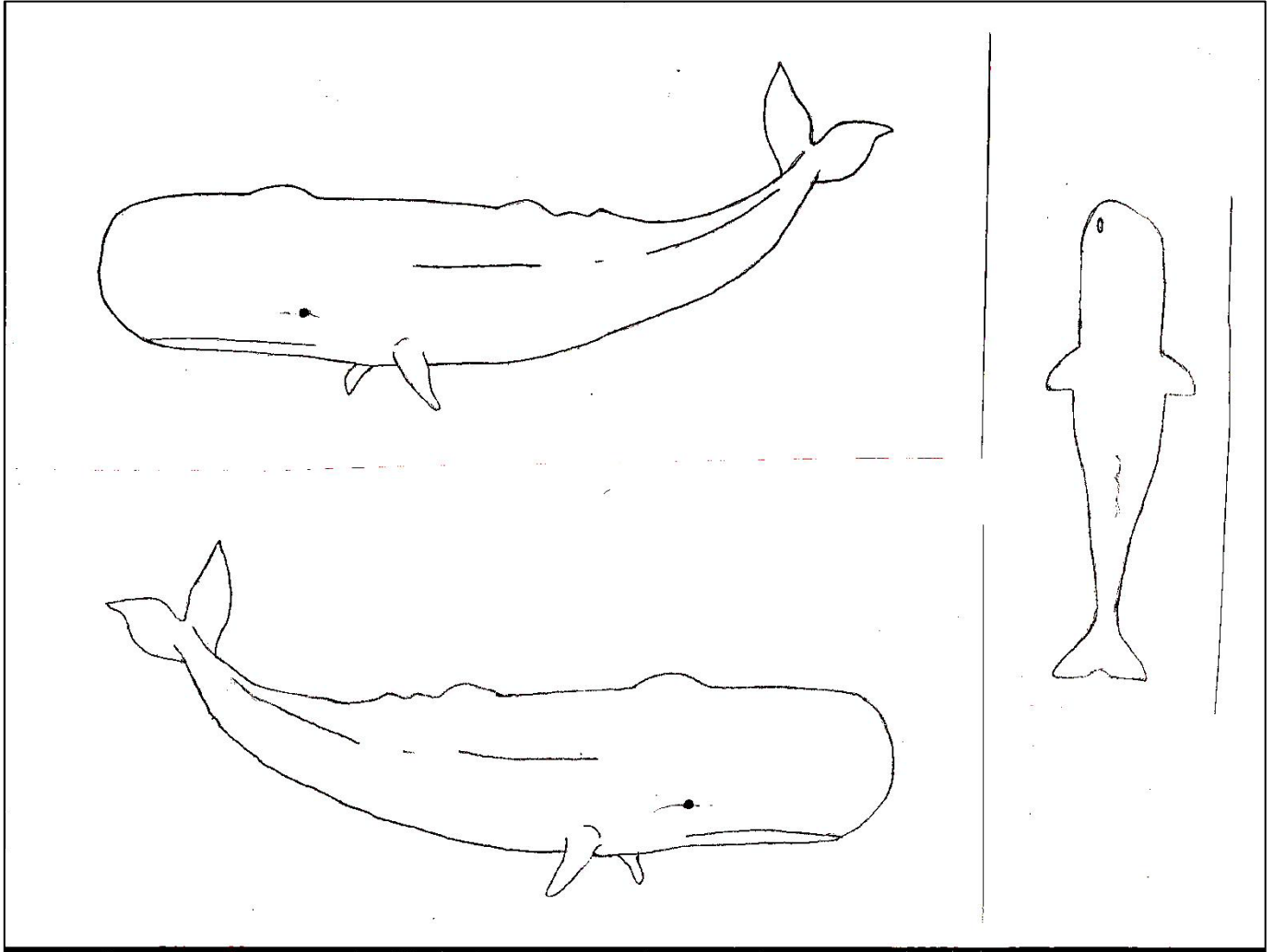
SPECIMEN # _____

Circle YES, NO or UNK (Unknown)

- | | |
|--|-------------|
| 1. Were more than one whale entangled? | YES NO UNK |
| 2. Is the whale dead? (If YES, Skip to # 9) | |
| 3. YES NO UNK | |
| 4. Did live animal self-release? | YES NO UNK |
| 5. Was human intervention required for live animal release? | YES NO UNK |
| 6. Gear left on animal after release?
(If YES, go to #6 and #7, if NO skip to #8) | YES NO UNK |
| 7. a. Gear Loosely wrapped? | YES NO UNK |
| b. Visible gaps between the gear and body? | YES NO UNK |
| c. Does gear move when the whale moves? | YES NO UNK |
| 7. a. Gear tightly wrapped? | YES NO UNK |
| b. Does it indent the skin? | YES NO UNK |
| c. Can whale swim or move? | YES NO UNK |
| d. Is whale having trouble moving? | YES NO UNK |
| e. Is appendage near the gear discolored? | YES NO UNK |
| 8. a. Are there any lacerations on the whale's body? | YES NO UNK |
| b. Are there multiple lacerations? | YES NO UNK |
| c. How Many? : _____ | |
| d. Is/are the laceration(s) old (See instructions for description)?
(If YES or UNK, Skip to #9) | YES NO UNK |
| e. Is/are the laceration(s) caused by the gear?
(If NO, Skip to #9) | YES NO UNK |
| f. Is skin removed or damaged at the site of the laceration(s)? | YES NO UNK |
| g. Is blood visible? | YES NO UNK |
| h. Is blubber visible? | YES NO UNK |
| i. Provide an estimate of how deep the laceration(s) is/are in inches. _____ | |
| j. Is/are the laceration(s) penetrating the body? | YES NO UNK |
| k. Is bone visible? | YES NO UNK |
| l. Is the bone damaged? | YES NO UNK. |
| m. Is bone damage caused by laceration? | YES NO UNK |
| n. Is a flipper, dorsal fin, or fluke partially severed or missing? | YES NO UNK |

LARGE WHALE INTERACTION FORM

9. Draw and describe gear, lacerations and other injuries below:



Describe the interaction with the sperm whale including (gear, lacerations and other injuries):

Blank space for describing the interaction with the sperm whale, including gear, lacerations, and other injuries.