



FISH DATA SHEET

Sheet ID For Office Use Only

New Station
(requires lat/long & county)

Mix Zone

Page ____ of ____

Station ID _____ River Code _____ RM _____ Date _____ Time _____

Stream _____ Location _____

Comments _____

Lat _____ Long _____ County _____ ALP _____ Time Fished _____

Crew _____ Netter _____ Others _____ Sampler Type _____

Distance _____ Flow _____ Temp. C _____ Secchi _____ Source _____ Project _____

Fins Code	Number Weighed	Total Counted	Total Weight	Weights		DELT ANOMALIES								
				Counts		D	E	L	T	M	*			
V	10x													
V	10x													
V	10x													
V	10x													
V	10x													
V	10x													
V	10x													
V	10x													
V	10x													
V	10x													

* A-rubber worm; B-black spot; C-leeches; F-fungus; N-blot; P-parasites; S-swim bladder; W-wirled scales; Y-papery; Z-other
EPA 450K 05/7/2005

