OMB Number 0648-0349
Expiration Date 11/30/08

HIGH SEAS MOTHERSHIP LOG

Captain:	Captain's signature:	Date:	Page #:
Vessel Name	**Official Number**	**No fishing entire month of:**	**Crew size:**
			Observer on Board: ☐

GEAR TYPE OF HARVESTER (check one): Hook & Line ☐ Pot ☐ Non-pelagic trawl ☐ Pelagic trawl ☐ Jig/Troll ☐

TARGET SPECIES: PORT OF LANDING:

DELIVERY INFORMATION

CATCHER VESSEL NAME	CG #	RECEIPT TIME	RECEIPT POSITION Latitude N/S	Longitude E/W	ESTIMATED CATCH RECEIPT WEIGHT (Circle lb or mt)	COMMENTS

DAILY AMOUNTS OF RETAINED SPECIES: **Indicate:** ☐ **lb** ☐ **mt** ☐ **#**

SPECIES CODE											
DAILY TOTAL											

DAILY AMOUNTS OF DISCARDED SPECIES: **Indicate:** ☐ **lb** ☐ **mt** ☐ **#**

SPECIES CODE											
DAILY TOTAL											

MAIL COMPLETED LOG SHEET(S) TO: [Name and address of appropriate Regional Office]