

Trip ID: \_\_\_\_\_ (office only)

**GILLNET TRIP SUMMARY**  
**(This will be the cover sheet to your trip datasheets)**

**Obs./Trip #:** \_\_\_\_\_ **Vessel name:** \_\_\_\_\_ **Vessel #:** \_\_\_\_\_

**Owner/Captain Name:** \_\_\_\_\_ **# of Crew:** \_\_\_\_\_

**Incidental Take:** Y / N **If Yes, what set number(s):** \_\_\_\_\_

**Biological Samples Taken:** Y / N **Check In Sheet Included:** Y / N

**Departure Date:** \_\_\_\_\_ **Time:** \_\_\_\_:\_\_\_\_ **Departure Port:** \_\_\_\_\_  
mm/dd/yyyy City, State

**Return Date:** \_\_\_\_\_ **Time:** \_\_\_\_:\_\_\_\_ **Return Port:** \_\_\_\_\_  
mm/dd/yyyy City, State

**Sea Days:** \_\_\_\_\_ **Number of Sets:** \_\_\_\_\_ **False Strike:** Y / N

**Target:** SHARK / TELEOST / MIX **Weigh out location:** \_\_\_\_\_

**Weigh out copy included:** Y / N

**Invoice:** Only for trips longer than two days. Be sure to get captain/owner SS# and signature!

\_\_\_\_ Enclosed with trip data (For multiple trips per invoice, indicate which Trip #: \_\_\_\_\_)

\_\_\_\_ Left completed with captain/owner

**Vessel accommodations:**

**Head:** Y / N **AC and/or Heat:** Y / N (circle which applies)

**Bunk:** Y / N **Bunk Location:** \_\_\_\_\_

**Fresh Water and/or Shower:** Y / N (circle which applies) **Infections:** Y / N

**Comments:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Office use only:	Data received: ____/____/____	_____
Data entry: ____/____/____	_____	Dbase proofed: ____/____/____
Debrief: ____/____/____	_____	Invoice filed: ____/____/____