

## **LOST GEAR REPORT**

Date Reported://	
Date Lost://	
Owner of Gear:	
Contact phone number:	
BIA/Fishery ID # (5 digit) :	<del></del>
Number Lost:	
Description of gear (make, size, identifi	able markings, etc.):
	A
Last Location:	
Signature	Authorized Date Stamp Below
Printed Name	

Completing this form is a requirement.

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\*\*\* However, it is still possible to receive a citation based on circumstances.

Please text a photo of this form to:

360-710-2367