



MARYLAND DEPARTMENT OF NATURAL RESOURCES
FISHERIES SERVICE
SNAPPING TURTLE HARVEST REPORT

Month: _____
(Authority: NR § 4-218)

Name:	License Number:
Street:	FINISHED TURTling FOR THE YEAR <input type="checkbox"/>
City, Street Zip:	DID NOT TURTLE <input type="checkbox"/>
ALL HARVEST MUST BE REPORTED ON YOUR FINFISH REPORT	

REPORT HARVEST HERE:

DAY	# SNAPPING TURTLES HARVESTED	POUNDS HARVESTED	NOAA CODE	# TRAPS SET	# SMALL TURTLES RELEASED	DAY	# SNAPPING TURTLES HARVESTED	POUNDS HARVESTED	NOAA CODE	# TRAPS SET	# SMALL TURTLES RELEASED
1						16					
2						17					
3						18					
4						19					
5						20					
6						21					
7						22					
8						23					
9						24					
10						25					
11						26					
12						27					
13						28					
14						29					
15						30					
						31					

REPORT SALES HERE:

DATE	# TURTLES SOLD	POUNDS	SOLD TO (Dealer Name/Public)

WRITE COMMENTS HERE:

SEND TO: DNR Permits Coordinator, 580 Taylor Ave, B-2, Annapolis, MD 21401 Or Fax 410 260-8279

Signature: _____ Date: _____

I certify that the information provided on this form is true, complete, and correct to the best of my knowledge, and made in good faith. Making false statement on this form is punishable by law (Article 27, Section 45 A).