



# Alaska Department of Fish and Game

## Coded Wire Tag Sampling Form

Commercial Fisheries  
Southeast Region

**FIGURE 1**

PAGE  OF PAGES



Page Info for this Sample Number only! See Instructions

**SAMPLE NUMBER:**

**HARVEST TYPE:**  
 11-traditional    18-confiscated  
 12-terminal-area    21-pnp-fish  
 13-spring-troll    41-test-run-strength  
 14-exper-gear    42-test-special  
 17-M-I-C

**SURVEY SITE:** \_\_\_\_\_

**SAMPLE TYPE:**    random    select

**SAMPLER:** \_\_\_\_\_

**SAMPLE TIME:**    begin \_\_\_\_ end \_\_\_\_

**DATE FIRST CAUGHT:**  -  -

**DATE LAST CAUGHT:**  -  -

**DATE SOLD (LANDED):**  -  -

**DATE SAMPLED:**  -  -

**CATCHER INFORMATION**

**PROCESSOR:** \_\_\_\_\_

**ADF&G#:**

**VESSEL OR OWNER'S NAME:** \_\_\_\_\_

**TENDER?**  **MULTIPLE TENDERS?**

00 - trap    01 - purse seine  
 GEAR TYPE: 03 - drift gillnet    04 - set gillnet  
 05 - hand troll    15 - power troll

**AREA INFORMATION (DISTRICT-SUBDISTRICT)**

101-	106-	111-	116-	157-	191-
102-	107-	112-	150-	181-	192-
103-	108-	113-	152-	182-	OTHER DISTRICTS
104-	109-	114-	154-	183-	_____
105-	110-	115-	156-	189-	_____

**NAME OF PLACE FISHED:** \_\_\_\_\_

**WATER TYPE:**    saltwater    freshwater

**ANADROMOUS STREAM# (FRESHWATER-ONLY)** \_\_\_\_\_

**SAMPLING INFORMATION**

*THIS BOX IS TO BE COMPLETED FOR RANDOM SAMPLES ONLY*

SPECIES (CODE)	TOTAL # FISH CHECKED FOR AD-CLIPS	# AD-CLIPS SEEN	WERE ALL CHECKED?
(410)CHIN	_____	_____	y n
(411)JACK	_____	_____	y n
(420)SOCK	_____	_____	y n
(430)COHO	_____	_____	y n
(440)PINK	Not in S.E.	_____	y n
(450)CHUM	_____	_____	y n
(540)STHD	Troll Only	_____	y n

**HEAD RECOVERY INFORMATION**

HEAD NUMBER	SPECIES CODE	LENGTH (mid-eye to fork in mm)	ATA NUMBER	CLIP FLESH (Chin. only)
<input checked="" type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**COMMENTS:**

FPD Trip# \_\_\_\_\_

CONFIDENTIAL INFORMATION