

RECORDS COMMITTEE

DOCUMENTATION FORM

Mail to: Jon S. Greenlaw, Corresponding Secretary
Archbold Biological Station
P.O. Box 2057
Lake Placid, FL 33862

Received:
FOSRC No.:
Accepted:
Not Accepted
Date:

1. Species: Common name: Scientific name:
2. How many birds observed? Scientific name:

3. Age: 4. Sex: 5. Date(s) observed: 6. Time of day

7. Duration of observation: 8. Sky condition:

9. Exact location County: Nearest city/town: Specific location:

10. Habitat:

11. Distance from bird (paced, estimated, other): 12. Optical equipment:

13. Relationship of sun/observer/bird:

14. Others with you who saw bird

Name: Address:
Name: Address:
Name: Address:

15. Others who have independently ID bird

Name: Address:
Name: Address:
Name: Address:

16. Anybody known to disagree with ID?

Name: Address:
Name: Address:
Name: Address:

17. Vocalizations:

18. Behavior :

19. Describe in detail the features that YOU noted. You should include the SHAPE, SIZE, and COLOR of ALL PARTS OF BODY including head, bill, eyes, lores, eye rings, other facial markings, back, wings, wing bars, tail, tail bars or spots, throat, breast, belly, tail coverts, legs, etc.

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20. What similar species were considered and why were they eliminated? \_\_\_\_\_

21. Explain previous experience with this species: \_\_\_\_\_

22. Explain previous experience with similar species: \_\_\_\_\_

23. Did you identify bird before consulting a field guide? YES \_\_\_\_\_ NO: \_\_\_\_\_

24. What guides or aides influenced your decision? \_\_\_\_\_

25. Indicate any materials submitted:

PHOTO(S) \_\_\_\_\_ VIDEO CASSETTE \_\_\_\_\_ AUDIO CASSETTE \_\_\_\_\_ SPECIMEN (or part) \_\_\_\_\_

Describe parts or other materials submitted \_\_\_\_\_

26. Attach any drawings made during or after observation. Drawings made BEFORE \_\_\_\_\_ or AFTER \_\_\_\_\_ Consulting field guide

USE AND ATTACH ANY ADDITIONAL PAGES AS NEEDED

By placing my signature on the line below, I agree to allow the Florida Ornithological Society Records Committee to review and evaluate all materials that I have submitted, retain all these materials in its archives, and publish its finding in the *Florida Field Naturalist*.

Signature: \_\_\_\_\_

Your Name (Please Print) Address

Phone

Date Prepared

THANK YOU