

1. Where Did You Bird?

Your Name: _____

Name of Count Site: _____

2. Date and Effort

1. Count Protocol (Check one) ☐ Stationary ☐ Traveling ☐ Incidental

2. Observation Date: _____ Start time: _____ AM / PM

3. Number of birders: _____ Minutes birding _____ Distance traveled _____

3. Checklist Information—What Did You See?

Are you reporting all the species you identified? (Check one) ☐ Yes ☐ No

Species	Total # of Individuals	Notes

Can't identify a bird in the field? Use the back to sketch or describe any birds you couldn't identify. Include as much information as possible (field marks, shape, size, behavior, where it was seen) so you can use a field guide to identify it later.

