

2200 NORTH 33RD, P.O. BOX 30370 LINCOLN, NE 68503

BAIT DEALER ANNUAL REPORT

NOTE: Reports for the previous year are d	ue by January 15 th .
PERMIT NUMBER:	YEAR OF ANNUAL REPORT:
PERMIT HOLDER=S NAME:	
BUSINESS NAME:	
ADDRESS:	

LIST BAIT SPECIES COLLECTED OR PURCHASED UNDER THE BAIT DEALER PERMIT

MONITU	BAIT		Please indicate (T)		LOCATION COLLECTED	PURCHASED
MONTH OBTAINED	SPECIES	NUMBER*	COLLECTED	PURCHASED	WATERBODY NAME AND COUNTY	FROM

(Please record additional information on back)

* Please indicate numbers as gallons, pounds or individuals.

	BAIT SPECIES	NUMBER*	Please indicate (T)		LOCATION COLLECTED	PURCHASED
MONTH OBTAINED			COLLECTED	PURCHASED	WATERBODY NAME AND COUNTY	FROM

SIGNATURE:_	DATE <u>:</u>	

^{*} Please indicate numbers as gallons, pounds or individuals.