

MIX

PRIMARY HARVESTER VMRC ID & NAME	<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
004622			RRM	24	AGN	6800 ft	2	4
NAME: P. Chembacca		AGENT NAME	SPECIES & MARKET CATEGORY	AMOUNT	UNITS (CIRCLE ONE):			
BUYER: Bride of VA.		VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			
VESSEL NAME: 965ANN			men	10	1			
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID								
VMRC ID: B511	NAME: J. Bink							
		PUBLIC ROCK ABBR (OYSTERS ONLY)						
		AREA (OYSTER ONLY)						
		CITY/COUNTY LANDED						
		DATE (ONE PER TICKET)						
009H0B		Q. Amadala						
		4/12/2015						

PRIMARY HARVESTER VMRC ID & NAME	<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
004622			RRM	24	AGN	1500 ft	3	2
NAME: Bride of VA.		AGENT NAME	SPECIES & MARKET CATEGORY	AMOUNT	UNITS (CIRCLE ONE):			
BUYER: Bride of VA.		VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			
VESSEL NAME: 965NN			men	18 1/2	9			
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID								
VMRC ID: B511	NAME:							
		PUBLIC ROCK ABBR (OYSTERS ONLY)						
		AREA (OYSTER ONLY)						
		CITY/COUNTY LANDED						
		DATE (ONE PER TICKET)						
		4/13/2015						

PRIMARY HARVESTER VMRC ID & NAME	<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
004622			RRM	24	AGN	1300 ft	3	2
NAME: Bride of VA.		AGENT NAME	SPECIES & MARKET CATEGORY	AMOUNT	UNITS (CIRCLE ONE):			
BUYER: Bride of VA.		VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			
VESSEL NAME: 965NN			men	13	1			
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID								
VMRC ID: B511	NAME:							
		PUBLIC ROCK ABBR (OYSTERS ONLY)						
		AREA (OYSTER ONLY)						
		CITY/COUNTY LANDED						
		DATE (ONE PER TICKET)						
		4/14/2015						

RECEIVED

SEP 08 2015

* Check (✓) if Processed = The live weight or amount column is actually processed weight (e.g. catfish filets, puffer tails, gutted fish, etc.) Complete ALL information on the first ticket of each "3 ticket" form; duplicate information can be left blank on the following two tickets of the same form. DO NOT CUT FORMS!

(BLUE OR BLACK INK ONLY)

VMRC COPY

MR 799462

PRIMARY HARVESTER VMRC ID & NAME	<input type="checkbox"/> CHECK IF AGENT USED	↓AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
			Rapp (RRM)	24	AGN	1800ft	3	2
↓NAME		↓AGENT NAME	↓SPECIES & MARKET CATEGORY	↓AMOUNT	↓UNITS (CIRCLE ONE):			* Check if processed
		↓BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID		↓VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓VMRC ID	↓NAME	↓VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

DO NOT ENTER

PRIMARY HARVESTER VMRC ID & NAME	<input type="checkbox"/> CHECK IF AGENT USED	↓AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
			Rapp	24	AGN	1800ft	3	2
↓NAME		↓AGENT NAME	↓SPECIES & MARKET CATEGORY	↓AMOUNT	↓UNITS (CIRCLE ONE):			* Check if processed
		↓BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID		↓VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓VMRC ID	↓NAME	↓VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

DO NOT ENTER

PRIMARY HARVESTER VMRC ID & NAME	<input type="checkbox"/> CHECK IF AGENT USED	↓AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
			Rapp	24	AGN	1800ft	3	2
↓NAME		↓AGENT NAME	↓SPECIES & MARKET CATEGORY	↓AMOUNT	↓UNITS (CIRCLE ONE):			* Check if processed
		↓BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID		↓VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓VMRC ID	↓NAME	↓VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
		↓DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

* Check (✓) if Processed = The live weight or amount column is actually processed weight (e.g. catfish filets, puffer tails, gutted fish, etc.) Complete ALL information on the first ticket of each "3 ticket" form; duplicate information can be left blank on the following two tickets of the same form. DO NOT CUT FORMS!

(BLUE OR BLACK INK ONLY)

VMRC COPY

MR 799467

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓ AGENT NAME	↓ SPECIES & MARKET CATEGORY	↓ AMOUNT	↓ UNITS (CIRCLE ONE):			* Check if processed
			↓ BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓ VESSEL ID NO.						<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓ VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

Handwritten notes: **REM** (circled), **ARM** (circled), **CRM** (circled), **CRZ** (circled), **yes** (circled), **4/20/15** (circled), **4/19/2015** (circled), **OBier SFD (033)**, **VAB65ANN**, **Lancaster**.

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓ AGENT NAME	↓ SPECIES & MARKET CATEGORY	↓ AMOUNT	↓ UNITS (CIRCLE ONE):			* Check if processed
			↓ BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓ VESSEL ID NO.						<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓ VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

Handwritten notes: **ARM** (circled), **CRM** (circled), **CRZ** (circled), **yes** (circled), **4/21/2015** (circled), **OBier SFD**, **CRM**, **CRZ**, **Lancaster**.

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓ AGENT NAME	↓ SPECIES & MARKET CATEGORY	↓ AMOUNT	↓ UNITS (CIRCLE ONE):			* Check if processed
			↓ BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓ VESSEL ID NO.						<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓ VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

Handwritten notes: **ARM** (circled), **CRM** (circled), **CRZ** (circled), **yes** (circled), **4/22/15** (circled), **4/20/2015** (circled), **OBier SFD**, **965NN**, **CRM**, **CRZ**, **Lancaster**.

* Check (✓) If Processed = The live weight or amount column is actually processed weight (e.g. catfish fillets, puffer tails, gutted fish, etc.) Complete ALL information on the first ticket of each "3 ticket" form; duplicate information can be left blank on the following two tickets of the same form. DO NOT CUT FORMS!

(BLUE OR BLACK INK ONLY)

VMRC COPY

MR 799471

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	↓AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓AGENT NAME	↓SPECIES & MARKET CATEGORY	↓AMOUNT	↓UNITS (CIRCLE ONE):			* Check if processed
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓VESSEL ID NO.			BU LBS NU BBL <u>BOX</u> DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	↓AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓AGENT NAME	↓SPECIES & MARKET CATEGORY	↓AMOUNT	↓UNITS (CIRCLE ONE):			* Check if processed
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓VESSEL NAME			BU LBS NU BBL <u>BOX</u> DOZ GAL TRAY			<input type="checkbox"/>
			↓PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	↓AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓AGENT NAME	↓SPECIES & MARKET CATEGORY	↓AMOUNT	↓UNITS (CIRCLE ONE):			* Check if processed
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓VESSEL ID NO.			BU LBS NU BBL <u>BOX</u> DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

* Check (✓) If Processed = The live weight or amount column is actually processed weight (e.g. catfish fillets, puffer tails, gutted fish, etc.)
Complete ALL information on the first ticket of each "3 ticket" form; duplicate information can be left blank on the following two tickets of the same form. DO NOT CUT FORMS!

(BLUE OR BLACK INK ONLY)

MR 799468

VMRC COPY

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
				RRM	24	AGN	1200	4	2
VMRC ID	NAME		AGENT NAME	SPECIES & MARKET CATEGORY	AMOUNT	UNITS (CIRCLE ONE):			
			BUYER			<input checked="" type="radio"/> BU LBS <input type="radio"/> NU <input type="radio"/> BBL <input type="radio"/> BOX <input type="radio"/> DOZ <input type="radio"/> GAL <input type="radio"/> TRAY			
ADDITIONAL HARVESTERS VMRC ID & NAME(S) LIST ONLY HELPERS WITH VMRC ID			VESSEL ID NO.						
			VESSEL NAME						
			PUBLIC ROCK ABBR (OYSTERS ONLY)						
			LEASE NUMBER (AQUA. ONLY)						
			CITY/COUNTY LANDED						
			DATE (ONE PER TICKET)						
			04-22-15 (4/21/15) Rock's Neck Rd/Lancaster						

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
				RRM	24	AGN	1200	4	2
VMRC ID	NAME		AGENT NAME	SPECIES & MARKET CATEGORY	AMOUNT	UNITS (CIRCLE ONE):			
			BUYER			<input checked="" type="radio"/> BU LBS <input type="radio"/> NU <input type="radio"/> BBL <input type="radio"/> BOX <input type="radio"/> DOZ <input type="radio"/> GAL <input type="radio"/> TRAY			
ADDITIONAL HARVESTERS VMRC ID & NAME(S) LIST ONLY HELPERS WITH VMRC ID			VESSEL ID NO.						
			VESSEL NAME						
			PUBLIC ROCK ABBR (OYSTERS ONLY)						
			LEASE NUMBER (AQUA. ONLY)						
			CITY/COUNTY LANDED						
			DATE (ONE PER TICKET)						
			04-22-15 (4/22/15) Rock's Neck Rd/Lancaster						

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
				RRM	24	AGN	1200	4	2
VMRC ID	NAME		AGENT NAME	SPECIES & MARKET CATEGORY	AMOUNT	UNITS (CIRCLE ONE):			
			BUYER			<input checked="" type="radio"/> BU LBS <input type="radio"/> NU <input type="radio"/> BBL <input type="radio"/> BOX <input type="radio"/> DOZ <input type="radio"/> GAL <input type="radio"/> TRAY			
ADDITIONAL HARVESTERS VMRC ID & NAME(S) LIST ONLY HELPERS WITH VMRC ID			VESSEL ID NO.						
			VESSEL NAME						
			PUBLIC ROCK ABBR (OYSTERS ONLY)						
			LEASE NUMBER (AQUA. ONLY)						
			CITY/COUNTY LANDED						
			DATE (ONE PER TICKET)						
			04-23-15 (4/23/15) Rocky's Neck Rd/Lancaster						

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 Complete ALL information on the first ticket of each "3 ticket" form; duplicate information can be left blank on the following two tickets of the same form. DO NOT CUT FORMS!

(BLUE OR BLACK INK ONLY)
 VMRC COPY

2/1800

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓ AGENT NAME	↓ SPECIES & MARKET CATEGORY	↓ AMOUNT	↓ UNITS (CIRCLE ONE):			* Check if processed
			↓ BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓ VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓ VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓ AGENT NAME	↓ SPECIES & MARKET CATEGORY	↓ AMOUNT	↓ UNITS (CIRCLE ONE):			* Check if processed
			↓ BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓ VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓ VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓ AGENT NAME	↓ SPECIES & MARKET CATEGORY	↓ AMOUNT	↓ UNITS (CIRCLE ONE):			* Check if processed
			↓ BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓ VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓ VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

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(BLUE OR BLACK INK ONLY)
VMRC COPY

MR 799470

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓ AGENT NAME	↓ SPECIES & MARKET CATEGORY	↓ AMOUNT	↓ UNITS (CIRCLE ONE):			* Check if processed
			↓ BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓ VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓ VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

Handwritten entries: RRM, 24, RGN, 1800, 3, 2, O'Brien SFD, CRL, ~~AAA~~, 123, Lancaster, 4/12/2015, B511

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓ AGENT NAME	↓ SPECIES & MARKET CATEGORY	↓ AMOUNT	↓ UNITS (CIRCLE ONE):			* Check if processed
			↓ BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓ VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓ VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

Handwritten entries: RRM, 24, RGN, 1800, 3, 2, O'Brien SFD, CRM, 3, YEP, 2, CRL, 6, Lancaster, 4/18/2015, B511

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
↓ VMRC ID	↓ NAME		↓ AGENT NAME	↓ SPECIES & MARKET CATEGORY	↓ AMOUNT	↓ UNITS (CIRCLE ONE):			* Check if processed
			↓ BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓ VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
↓ VMRC ID	↓ NAME		↓ VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			↓ DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

Handwritten entries: RRM, 24, RGN, 1800, 2, 3, O'Brien SFD, CRM, 3, YEP, 4, CRL, 3, Lancaster, 4/19/2015, B511, 0094031

* Check (✓) If Processed = The live weight or amount column is actually processed weight (e.g. catfish filets, puffer tails, gutted fish, etc.) Complete ALL information on the first ticket of each "3 ticket" form; duplicate information can be left blank on the following two tickets of the same form. DO NOT CUT FORMS!

(BLUE OR BLACK INK ONLY)

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	↓AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
				Rapp	2.4	AGN	1800	3	2
↓ VMRC ID	↓ NAME		↓AGENT NAME	↓SPECIES & MARKET CATEGORY	↓AMOUNT	↓UNITS (CIRCLE ONE):			
			OBier SFD			BU LBS NU BBL BOX DOZ GAL TRAY			
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓VESSEL ID NO.						
↓VMRC ID	↓NAME		965ANN						
			↓VESSEL NAME	CRM	14	9			
			↓PUBLIC ROCK ABBR (OYSTERS ONLY)	CR2	15	9			
			↓AREA (OYSTER ONLY)	Yep	1	9			
			↓CITY/COUNTY LANDED						
			Lancaster						
			↓DATE (ONE PER TICKET)						
			4/23/15	4/23/2015					

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	↓AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
					24	AGN	1500	3	2
↓ VMRC ID	↓ NAME		↓AGENT NAME	↓SPECIES & MARKET CATEGORY	↓AMOUNT	↓UNITS (CIRCLE ONE):			
			OBier SFD			BU LBS NU BBL BOX DOZ GAL TRAY			
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓VESSEL ID NO.						
↓VMRC ID	↓NAME		965NN						
			↓VESSEL NAME	CRAT	11	9			
			↓PUBLIC ROCK ABBR (OYSTERS ONLY)	CRM	29	9			
			↓AREA (OYSTER ONLY)	CR2	20	9			
			↓CITY/COUNTY LANDED	Yep	2	9			
			Lancaster						
			↓DATE (ONE PER TICKET)						
			4/24/15	4/23/2015					

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	↓AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
				Rapp	24	AGN	1500	3	2
↓ VMRC ID	↓ NAME		↓AGENT NAME	↓SPECIES & MARKET CATEGORY	↓AMOUNT	↓UNITS (CIRCLE ONE):			
			OBier SFD			BU LBS NU BBL BOX DOZ GAL TRAY			
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			↓VESSEL ID NO.						
↓VMRC ID	↓NAME		965NN						
			↓VESSEL NAME						
			↓PUBLIC ROCK ABBR (OYSTERS ONLY)	CR2	35	9			
			↓AREA (OYSTER ONLY)	CRM	73	9			
			↓CITY/COUNTY LANDED	Yep	1	9			
			↓DATE (ONE PER TICKET)						
			4/25/2015						

* Check (✓) If Processed = The live weight or amount column is actually processed weight (e.g. catfish fillets, puffer tails, gutted fish, etc.) Complete ALL information on the first ticket of each "3 ticket" form; duplicate information can be left blank on the following two tickets of the same form. DO NOT CUT FORMS!

(BLUE OR BLACK INK ONLY)

VMRC COPY

MR 799472

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
NAME			AGENT NAME	SPECIES & MARKET CATEGORY	AMOUNT	UNITS (CIRCLE ONE):			* Check if processed
BUYER			BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
VMRC ID	NAME		VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			PUBLIC ROCK ABBR (OYSTERS ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			CITY/COUNTY LANDED			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
NAME			AGENT NAME	SPECIES & MARKET CATEGORY	AMOUNT	UNITS (CIRCLE ONE):			* Check if processed
BUYER			BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
VMRC ID	NAME		VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			PUBLIC ROCK ABBR (OYSTERS ONLY)	CRZ	20	BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			AREA (OYSTER ONLY)	CRM	30	BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			CITY/COUNTY LANDED	YEP	2	BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

PRIMARY HARVESTER VMRC ID & NAME		<input type="checkbox"/> CHECK IF AGENT USED	AGENT VMRC ID	WATER FISHED	HRS GEAR FISHED	GEAR	GEAR AMOUNT	MAN HOURS	NO. OF CREW
NAME			AGENT NAME	SPECIES & MARKET CATEGORY	AMOUNT	UNITS (CIRCLE ONE):			* Check if processed
BUYER			BUYER			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
ADDITIONAL HARVESTERS VMRC ID & NAME(S) ONLY LIST NAME(S) THAT HAVE VMRC ID			VESSEL ID NO.			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
VMRC ID	NAME		VESSEL NAME			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			PUBLIC ROCK ABBR (OYSTERS ONLY)	CRM	31	BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			AREA (OYSTER ONLY)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			CITY/COUNTY LANDED	YEP	1	BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>
			DATE (ONE PER TICKET)			BU LBS NU BBL BOX DOZ GAL TRAY			<input type="checkbox"/>

* Check (✓) If Processed = The live weight or amount column is actually processed weight (e.g. catfish filets, puffer tails, gutted fish, etc.) Complete ALL information on the first ticket of each "3 ticket" form; duplicate information can be left blank on the following two tickets of the same form. DO NOT CUT FORMS!

(BLUE OR BLACK INK ONLY)

MR 799473

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