

Community Harvested Sample Collection Datasheet

Sampler Full Name: _____

Location (if on lake, record lake name): _____

Sampling location description (UTM coordinates): _____

Did you mark the location on a map, or do you have GPS/coordinates? **Yes / No**

What species is this sample? **(Choose from the following):**

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Walleye | <input type="checkbox"/> Moose | <input type="checkbox"/> Canada Goose | <input type="checkbox"/> Blueberry |
| <input type="checkbox"/> Northern Pike | <input type="checkbox"/> Whitetail Deer | <input type="checkbox"/> Mallard Duck | <input type="checkbox"/> Cranberry |
| <input type="checkbox"/> Lake Trout | <input type="checkbox"/> Black Bear | <input type="checkbox"/> Ruffed Grouse | <input type="checkbox"/> Raspberry |
| <input type="checkbox"/> Lake Whitefish | <input type="checkbox"/> Lynx | <input type="checkbox"/> Spruce Grouse | <input type="checkbox"/> Wild Mushroom |
| <input type="checkbox"/> Cisco | <input type="checkbox"/> Wolf | <input type="checkbox"/> Snowshoe Hare | <input type="checkbox"/> Labrador Tea |
| <input type="checkbox"/> White Sucker | <input type="checkbox"/> Beaver | | <input type="checkbox"/> Chaga |
| | <input type="checkbox"/> Muskrat | | <input type="checkbox"/> Wild Rice |
| | <input type="checkbox"/> Mink | | <input type="checkbox"/> Rat Root |

Date of Harvest: _____

Date of Death (if known): _____

How did you harvest it? **(Choose from the following):**

- Hunting
 - If hunting is selected, please note which of the following was used:
 - Steel shot
 - Lead shot
 - Other (please specify): _____
 - Where did the shot enter the animal? _____
- Fishing
- Trapping
- By Hand (berries, plants)
- Roadkill
- Other (please specify): _____

Tissue Type **(please select all that apply):**

- | | | | |
|--------------------------------------|-------------------------------------|--------------------------------|---|
| <input type="checkbox"/> Whole Plant | <input type="checkbox"/> Whole Body | <input type="checkbox"/> Heart | <input type="checkbox"/> Kidney(s) |
| <input type="checkbox"/> Leaves | <input type="checkbox"/> Muscle | <input type="checkbox"/> Liver | <input type="checkbox"/> Soil (co-located with berries) |

If a mammal, indicate the following if known:

Male /Female

Young / Adult

Is there anything you noticed that wasn't normal about this sample? _____

Has anything changed in the nearby land use since your last visit to this location? _____

Comments/Observations:

*Please complete the *Land Use Information Sheet* to the best of your ability and attach to this datasheet.

(For NWMO Use Only) **Sample ID:** _____