

Date: _____

Site Number: _____

Site Name: _____

Site Town: _____

Sample Time*: _____ AM | PM

Photo Time*: _____ AM | PM

Report Type*: Regular | Supplemental

Water Temp. (°F): _____

Water Surface*: Calm | Rolling | White Caps

Bloom Intensity*: 1a | 1b | 1c | 1d | 2 | 3

Extent along shore (ft.): _____

Extent into water (ft.): _____

Additional Details: _____

* *Circle*



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