

MELVERN CRAPPIE TAGGING SURVEY

Name _____

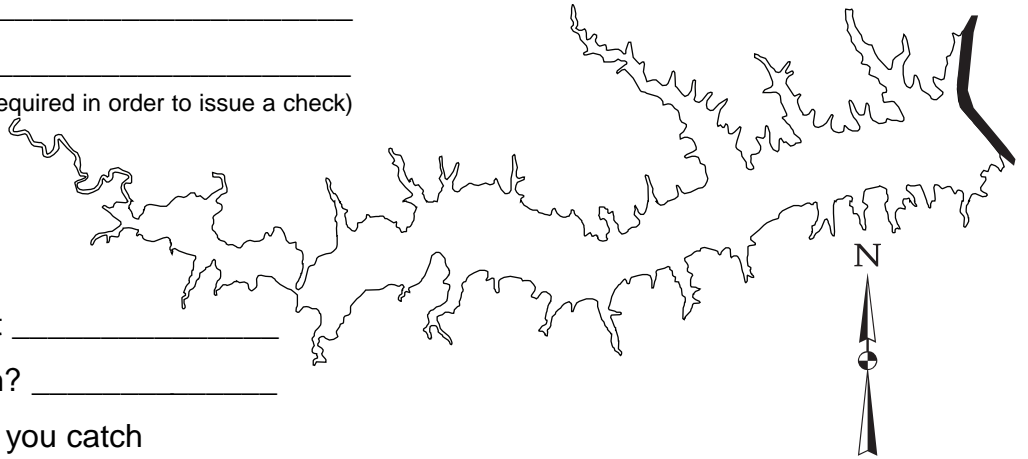
Address _____

Phone number _(_____)_____

Social Security Number _____

(SSN will be kept confidential and is required in order to issue a check)

**Mark an "X" where
you caught the fish.**



Date tagged fish was caught _____

Did you keep the tagged fish? _____

How many other crappie did you catch
from Melvern Reservoir the Same day? _____

How many crappie did you keep this day? _____

How many crappie do you need to catch to have a
good fishing trip? _____

ATTACH TAG WITH TAPE TO SURVEY, DO NOT SCRAPE.

**ENCLOSE SURVEY IN ENVELOPE
AND RETURN TO:**
Research and Survey Office
Kansas Department of Wildlife & Parks
P.O. Box 1525
Emporia, KS 66801-1525