

**HOBBY DIVER –  
 QUARTERLY  
 FOSSIL REPORT**

NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 LICENSE # \_\_\_\_\_ MONTHS REPORTED \_\_\_\_\_  
 NO RECOVERIES MADE THIS QUARTER

LOCATION \_\_\_\_\_ DIVE DATE \_\_\_\_\_

HAVE YOU INCLUDED?  
 Copy of Topo Map indicating Site  
 Highway Map Photographs  
 Drawings Detailed description of finds.

COLLECTION DATA Groups:  
 1. Invertebrates 2. Fishes 3. Amphibians  
 4. Reptiles 5. Birds 6. Mammals  
 7. Unknown

GROUP (1-7)	SPECIES Or Kind of Animal	ITEM Describe or Identify (Tooth, femur, skull fragment, long bone, etc.)	NUMBER of each item that is:		
			Complete	Near Complete	Fragment
Notes:					

LOCATION \_\_\_\_\_ DIVE DATE \_\_\_\_\_

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Please send reports to: Chief Curator of Natural History • South Carolina State Museum • PO Box 100107 •  
Columbia, SC 29202-3107