Call Detail:

Date/Time of Call: _____

Description:

Transporter Name:

Hours: _____ Miles _____

Center Case Number: _____

Vicinity:			Property:
[ ]Arroyo Grande	[ ]Creston	[ ]Paso Robles	[ ]N/A [ ]Business
[ ]Atascadero	[ ]Grover Beach	[ ]Pismo Beach	[ ]Municipal [ ]County
[ ]Avila Beach	[ ]Los Osos	[ ]San Luis Obispo	[ ]State
[ ]Cambria	[ ]Morro Bay	[ ]San Miguel	[ ]Federal
[ ]Cayucos	[ ]Nipomo	[ ]Shandon	[ ]Road/Highway
[ ]Co of SLO	[ ]Oceano	[ ]Templeton	[ ]Other
	[ ]Oceano Dunes SP	[ ]Other	

Species:	Call Reason:	Action:
[ ]Mammal	[ ]Broken wing	[ ]N/A [ ]Educational
[ ]Avian/seabird	[ ]Starvation	[ ]Unable to Locate [ ]Unable to Capture
[ ]Avian/raptor	[ ]Car Strike	[ ]Unable to Contact Caller
[ ]Avian/other	[ ]Hook/Line Ent.	[ ]Case delivered to Center
[ ]Reptile	[ ]Poison*	[ ]To ODSP Shed
[ ]Amphibian	[ ]Shot*	[ ]No transporter
[ ]Other	[ ]Trapped*	[ ]Call referred (please note)
	[ ]Other	[ ]No action required

Notes/Follow-up

Notes:

Caller information:

Business Name:

Caller Name:

Address:

City, State ZIP

email address:

Phone(s) (Cell/Home/Business):

Card Sent: Y/N

Use reverse side if necessary

Date/Time of Resolution: _____   **Approx. Time to Resolution: 15 30 45 60 60+**

Call Detail:

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Description:

Transporter Name:

Hours: _____ Miles _____

Center Case Number: _____

Vicinity:			Property:
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Notes/Follow-up

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Phone(s) (Cell/Home/Business):

Card Sent: Y/N

Use reverse side if necessary

Date/Time of Resolution: _____   **Approx. Time to Resolution: 15 30 45 60 60+**

Prepared by: _____