

IOU Christmas Bird Count Report Form

Count name: _____

Compiler's name: _____

Compiler's address: _____

Email: _____

Or Area Code and Phone: _____

Count Date: _____

Number of Species: _____

Total birds: _____

FIELD PARTIES (do not include feeder or owling efforts here)

Total number of observers: _____

Number of field parties _____

Total party hours: _____

Party miles by foot: _____

Party miles by car: _____

OWLING

Hours owling: _____

Miles owling: _____

FEEDER PARTIES

Number of feeder parties: _____

Total feeder hours: _____

WEATHER (cross out those that don't apply):

a.m. clear cloudy rain sleet snow fog

p.m. clear cloudy rain sleet snow fog

Temperature (min/max): _____ / _____

Wind (predominant direction): _____

Wind velocity (min/max): _____ / _____

Average snow depth (inches): _____

Water conditions (cross out those that don't apply):

Still water: partly mostly frozen open

Moving water: partly mostly frozen open

**Be sure to include details/documentation for any unusual species (see species list).

Send effort and species (by 15 January) to:

Chris Caster

1813 Liberty Lane

Coralville, IA 52241