IOU Christmas Bird Count Report Form, v. 2025

Count name:_____
Compiler's name:_____
Compiler's address:_____
_____
Email:_____
Phone: _____

Count Date:_____
Number of Count Day Species:_____
Total Count Day Birds:_____

FIELD PARTIES (do not include feeder or owling efforts here)
Total number of observers:_____
Number of field parties_____
Total party hours:_____
Party miles on foot:_____
Party miles by car:_____

OWLING
Hours owling:_____
Miles owling:_____

FEEDER PARTIES
Number of feeder parties:_____
Total feeder hours:_____

WEATHER (circle those that 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 (circle those that 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 forms (by February 1st) to Iowa CBC Editor:

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