RESOURCES AGENCY OF CALIFORNIA
DEPARTMENT OF FISH AND GAME
OFFICE OF OIL SPILL PREVENTION AND RESPONSE

PLEASE PRINT

OSPR DAILY ACTIVITY REPORT

NAME _____ HEADQUARTERS _____ MONTH _____ DAY _____ YEAR _____

TIME	LOCATION AND ACTIVITIES

PERSONS CONTACTED BY ACTIVITY

(RADIO CALL #	_____ (COUNTY CODE)				_____ (COUNTY CODE)			
ACTIVITY CODE	Hours	Contact	Arrest	Warnings	Hours	Contact	Arrest	Warnings

Violations reported		Travel expenses	$	
Resulting arrest		Auto miles	see below	
Information request		Other miles		
H.S. Inst. contacted		Boat hours		
H.S. class attended		Undercover	yes ☐	no ☐

Personal Protective Equipment

Booties	#pairs	Passive dosimeter badges	#
Nitriles	# pairs	Additional items:	
Comfort guard	# suits		
PE Tyvek	# suits		
Cartridges	# pairs		
Duct tape	# rolls		

OTHER PERSONS PRESENT ON PATROL	OTHER ACTIVITY	
	CODE	HOURS

COMPLAINTS RECEIVED - TYPE AND NUMBER: _____

REMARKS - FG. CONDITIONS: _____

Signature _____

INSTRUCTIONS:Complete at the end of each workday. Submit orginals to Regional Office and duplicates to Captain each Monday. Retain triplicates.