

NOTE: To qualify for an official State Record, the fish must be weighed on a certified scale in the presence of two witnesses and the species verified by an Environmental Scientist of the California Department of Fish and Wildlife.

This form must be completed and submitted to CDFW within one year of the date of catch.

Mail to: Saltwater Records Coordinator, 3030 Old Ranch Parkway, Suite 400, Seal Beach, CA 90740

This section to be completed by angler								
First Name		M.I.		Last	Name			
Mailing Address				•				
City			State		Zip		Daytime Pl	hone
E-Mail								
I hereby certify that I caught the fish I am presenting for identification on at in (county)								
The fish weighed lbs or								
AND was weighed and/or measured in the presence of other witnesses, whose names and addresses are: Witness #1								
Name, address, phone, and email ad	ddress							
Witness #2								
Name, address, phone, and email address								
Type of fishing gear used to take sp	pecimen:							
The fish was caught from: Remarks:	Shore	Boat		Other	r			
Enclosed Supporting Documentation: photograph certified weight slip								
This section to be completed by CDFW certifying employee								
I hereby certify that I have examined a fish presented to me by the above listed person and determined the species to be								
(common name) (genus)				(species)				
The condition of the fish at the time Date of Examination:	-	n was:	f	resh	fro	zen	prese	erved
Remarks:								
Certifying Fish and Wildlife Empl Name	oyee: Signature			Title			Phone	
IVAILIG	Signature			ille	,		FIIOHE	