



ABORIGINAL FISHERIES CLAM SLIP

OFFICIAL USE ONLY

FISH SLIP NUMBER

COMPANY CODE

PROCESSING PLANT

BUYER NAME

BAND/NATION

BUYER ADDRESS

HARVESTER'S NAME

BUYER PHONE

HARVESTER'S ADDRESS

DESIGNATION CARD NUMBER

LANDING DATE

| | | |
|-----------|-----------|-------------|
| | | |
| DD | MM | YYYY |

A B C D E F G
CIRCLE CLAM FISHING
AREA

DAYS DIGGING

HARVEST BEACH

HARVEST AREA – SUB AREA

| CODE | SPECIES | QUANTITY | | PRICE | VALUE |
|------|-------------|------------------------------|-----------------------------|-------|-------|
| | | <input type="checkbox"/> lbs | <input type="checkbox"/> kg | | |
| 761 | RAZOR | | | | |
| 82E | BUTTER | | | | |
| 82B | MANILA | | | | |
| 81H | NATIVE LN | | | | |
| 81G | MIXED CLAMS | | | | |
| | OYSTER | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

TOTAL _____
EMPLOYMENT INSURANCE _____
CASH _____
CREDIT TO _____

I certify that the above information is complete and correct.

Harvester's signature

Tallyman's signature