



Department of the Interior
U.S. Fish and Wildlife Service
Form 3-186A

USFWS Use Only
Received in Regional Office on
Initials:

MIGRATORY BIRD ACQUISITION AND DISPOSITION REPORT

Please see reverse for instructions

1 SPECIES: \_\_\_\_\_ USFWS Band Number: \_\_\_\_\_
Sex: [ ] Male [ ] Female [ ] Unknown Source: [ ] Captive-bred [ ] Wild Microchip Number: \_\_\_\_\_
Age: [ ] Nestling [ ] Immature [ ] Adult Year of Hatch: \_\_\_\_\_
2 SENDER (person transferring bird) USFWS Permit No.: \_\_\_\_\_
Name: \_\_\_\_\_ Date of Transfer (or other action): \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
E-Mail Address: \_\_\_\_\_
Permit: [ ] State Falconry [ ] FWS Raptor Propagation [ ] FWS Rehabilitation (see instructions) [ ] Other: \_\_\_\_\_
If a Transfer: [ ] Gift [ ] Sale [ ] Loan
If Release or Loss: [ ] Release [ ] Escape [ ] Theft [ ] Death -- Cause of Death: \_\_\_\_\_
3 RECIPIENT (person acquiring bird) USFWS Permit No.: \_\_\_\_\_
Name: \_\_\_\_\_ Date of Acquisition: \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
E-Mail Address: \_\_\_\_\_
Permit Type: [ ] State Falconry [ ] FWS Raptor Propagation [ ] Other: \_\_\_\_\_
Type of Acquisition: [ ] Gift [ ] Purchase [ ] Loan [ ] Capture/Recapture (complete section 4)
4 CAPTURE OR RECAPTURE (bird taken from the wild; provide band number in Section 1) [ ] Capture [ ] Recapture
For all species, County (or comparable subdivision) and State of trapping location: \_\_\_\_\_
If you captured a gyrfalcon, what color is it? [ ] Grey [ ] Black [ ] White [ ] Unknown (Nestling)
5 RE-BANDING (to report the re-banding of a wild or captive-bred bird)
Old Number: \_\_\_\_\_ [ ] Seamless Metal [ ] Yellow Plastic [ ] Black Plastic [ ] Microchip
New Number: \_\_\_\_\_ [ ] Yellow Plastic [ ] Black Plastic [ ] Microchip
6 CERTIFICATION. I certify that the information submitted above is true and correct to the best of my knowledge.
I understand that making a false statement may subject me to the criminal penalties of 18 U.S.C. 1001.
Print name: \_\_\_\_\_ Phone Number (with area code): \_\_\_\_\_
Signature (in blue ink) of permittee/principal officer. (No photocopied or stamped signatures) Date of signature (mm/dd/yyyy)