

ILLINOIS SPRING BIRD COUNT May 4th (official day) or 5th (extra day) (Please indicate count date below)

County: _____ **Date of count:** _____ **Earliest Starting Time (including owling):** _____ a.m.

Number of Observers: _____ **Number of Parties:** _____ Latest Ending Time (including owling): _____ p.m.

Total Party Miles: _____ **Total Party Hours:** _____ Morning Owling/Railing Hours: _____ to _____ p.m.

On foot: _____ On Foot: _____ Evening Owling/Railing Hours: _____ to _____ p.m.

By Car: _____ By Car: _____ Total Owling/Railing Party Hours: _____

Other: _____ Other: _____

Compiler: _____ Address: _____

Will you serve as compiler again in 2025: ____Yes ____ No

Compiler's Phone Number: () email address: _____

ALPHABETICAL listing of count participants and addresses (including compiler):

NAME	Email	Phone (if preferred over email)
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Please send completed **REPORT FORM**, **DATA SHEET** and **Documentation Forms**
to: Tara Beveroth, 1816 S. Oak St, Champaign, IL 61820.

SEND COMPLETED REPORTS BY JUNE 1st