



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

<b>1</b>	<b>SPECIES:</b> _____ <b>USFWS Band Number:</b> _____  <b>Sex:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown <b>Source:</b> <input type="checkbox"/> Captive-bred <input type="checkbox"/> Wild <b>Microchip Number:</b> _____ (if applicable) <b>Age:</b> <input type="checkbox"/> Nestling <input type="checkbox"/> Immature <input type="checkbox"/> Adult <b>Year of Hatch:</b> _____
<b>2</b>	<b>SENDER</b> (person transferring bird) <b>USFWS Permit No.:</b> _____  <b>Name:</b> _____ <b>Date of Transfer (or other action):</b> _____ <b>Address:</b> _____ <b>City:</b> _____ <b>State:</b> _____ <b>Zip:</b> _____ <b>E-Mail Address:</b> _____  <b>Permit:</b> <input type="checkbox"/> State Falconry <input type="checkbox"/> FWS Raptor Propagation <input type="checkbox"/> FWS Rehabilitation (see instructions) <input type="checkbox"/> Other: _____ <b>If a Transfer:</b> <input type="checkbox"/> Gift <input type="checkbox"/> Sale <input type="checkbox"/> Loan <b>If Release or Loss:</b> <input type="checkbox"/> Release <input type="checkbox"/> Escape <input type="checkbox"/> Theft <input type="checkbox"/> Death -- Cause of Death: _____
<b>3</b>	<b>RECIPIENT</b> (person acquiring bird) <b>USFWS Permit No.:</b> _____  <b>Name:</b> _____ <b>Date of Acquisition:</b> _____ <b>Address:</b> _____ <b>City:</b> _____ <b>State:</b> _____ <b>Zip:</b> _____ <b>E-Mail Address:</b> _____  <b>Permit Type:</b> <input type="checkbox"/> State Falconry <input type="checkbox"/> FWS Raptor Propagation <input type="checkbox"/> Other: _____ <b>Type of Acquisition:</b> <input type="checkbox"/> Gift <input type="checkbox"/> Purchase <input type="checkbox"/> Loan <input type="checkbox"/> Capture/Recapture (complete section 4)
<b>4</b>	<b>CAPTURE OR RECAPTURE</b> (bird taken from the wild; provide band number in Section 1) <input type="checkbox"/> Capture <input type="checkbox"/> Recapture <b>For all species, County (or comparable subdivision) and State of trapping location:</b> _____ <b>If you captured a gyrfalcon, what color is it?</b> <input type="checkbox"/> Grey <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Unknown (Nestling)
<b>5</b>	<b>RE-BANDING</b> (to report the re-banding of a wild or captive-bred bird)  <b>Old Number:</b> _____ <input type="checkbox"/> Seamless Metal <input type="checkbox"/> Yellow Plastic <input type="checkbox"/> Black Plastic <input type="checkbox"/> Microchip <b>New Number:</b> _____ <input type="checkbox"/> Yellow Plastic <input type="checkbox"/> Black Plastic <input type="checkbox"/> Microchip
<b>6</b>	<b>CERTIFICATION.</b> 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.  <b>Print name:</b> _____ <b>Phone Number (with area code):</b> _____  _____ <b>Signature (in blue ink) of permittee/principal officer. (No photocopied or stamped signatures)</b> <span style="float:right;"><b>Date of signature (mm/dd/yyyy)</b></span>