Recording of Input Submission for Ohio Survey of Lepidoptera

Ohio Survey of Lepidoptera

Submitter * _____ Date this form written _____

In Collection * _____ Collector/photographer _____ DA process date _____

(* = required) (? = unsexed)

Chk List # (optional)	Genus species subspecies *	County *	Location Use 2nd line for comment	Date *	Quantity ? ? ?	Type

DATE (format): mm/dd/yy (if before 1930 include century, ie 1913) TYPE: blank = specimen, P = photo, L = literature

Latitude and longitude is indicated in location by format of 'dd-mm-ss X dd-mm-ss'. Can leave seconds blank, ie 39-33 X 83-24.