

SWF tow done 8/9/16

Instructions: Bold fields must be completed.

Location Name	WBIC	County	Date(s)	AIS sign?	Secchi (ft. or m)	Conductivity (ZM ≥ 99 umhos/cm)	Collector(s)	Start Time	End Time	Total Hours (hrs x # ppl)
Long Lake	2631600	Polk	8/3/16	Yes	5 ft	38 umhos/cm	Katein Anderson Jerem Williamson Faithyn Atkins	10:15 AM	1:15 PM	9 hrs

Town of Johnston

STEP 1: Circle species that you looked for and review the Identification Handout. Looked for all

AQUATIC PLANTS/ALGAE		Parrot feather		Water chestnut		Phragmites		New Zealand mudsnails		Faucet snails	
Starry stonewort	Hydrilla	Water hyacinth	Didymo	Purple loosestrife	Purple loosestrife	Yellow flag iris	Japanese hop	Chinese/Banded mystery snails	Other		
Yellow floating heart	Curly leaf pondweed	Water lettuce	RIPARIAN PLANTS	Yellow flag iris	Yellow flag iris	Zebra/quagga mussels	INVERTEBRATES	Rusty/red swamp crayfish			
Brazilian waterweed	Fanwort	Eurasian water milfoil	Flowering rush	Japanese knotweed	Japanese knotweed	Asian clam		Spiny/fishhook waterflea			

STEP 2: Record locations of sampling sites (in decimal degrees). While snorkeling is optional, please indicate whether snorkeled or why not. List AIS found and density at each site or record none. Collect photographs and samples of any new AIS found. Include internal and external labels with WBIC, name of lake, county, sample date, and collector. Legibility is appreciated. If needed, preserve with adequate ethanol.

Site*	Latitude	Longitude	Snorkel (Y/N)	If no, indicate why†	Species name, density (1-5)‡, and live (L) or dead (D)§	Sample (Y/N)	Photo (Y/N)	No AIS	Comments
B21	45° 29.433"	92° 10.664'	N	Cyanobacteria	CMS 1 L	N	Y	X	
T91	45° 29.944'	92° 11.068'	N	Cyanobacteria				X	
T92	45° 29.813'	92° 10.780'	N	"				X	
T93	45° 29.703'	92° 10.737'	N	"	CMS 1 L	N	Y		
T94	45° 29.526'	92° 10.953'	N	"	CMS 1 L	N	M		
T95	45° 29.356'	92° 10.387'	N	"	CMS 2 L				

*boat landing (BL), target site (TS), meander survey (MS).

†Stained water, turbid water, blue-green bloom, chemical treatment, other (please describe).

‡Density ratings: 1-a few plants or invertebrates, 2-one or a few plant beds or colonies of invertebrates, 3-many small beds or scattered plants or colonies of invertebrates, 4-dense plant, snail, or mussel growth in a while bay or portion of the lake, or 5-dense plant, snail or mussel growth covering most shallow areas.

§Live (L) animals will contain flesh and live plants will generally be rooted. Dead (D) animals will not contain flesh and dead plants include sterile fragments.

STEP 3: Regional verifier examination specimen(s) and photographs and provide identification results. Submit to next verifier. Create ROI and attach documents.

Species	Specimen (Y/N)	Photo Name	Date sent	Comments	This section is completed by the verifier(s)						
					Verifier #1	Date	ID	Verifier #2	Date	ID	

STEP 4: For new aquatic invasive species populations, collect photographs and samples. Provide photos, preserved specimens, and copies of the datasheet to the regional DNR verifier. Name photos with the SPSCODE_YYMMDD_WBIC or STATIONID or LAT LONG_ COLLECTOR.

STEP 5: Data was entered into SWIMS on _____ by _____
Once data is entered, send scans of data sheets to central office (Maureen.Ferry@Wisconsin.gov).

STEP 6: Data was proofed on _____ by _____

Notes:

The purpose of this form is to track the presence/absence of spiny or fishhook water fleas collected using a plankton net during AIS monitoring.

Notice: Information on this voluntary form is collected under ss. 33.02 and 281.11, Wis. Stats. Personally identifiable information collected on this form will be incorporated into the DNR Surface Water Integrated Monitoring System (SWIMS) Database. It is not intended to be used for any other purposes, but may be made available to requesters under Wisconsin's Open Records laws, ss. 19.32 - 19.39, Wis. Stats.

Primary Data Collector			
Name	Katelin Anderson	Phone Number	715-485-8637
		Email	katelin.anderson@dnr.wi.us
Monitoring Location			
Waterbody Name	Long	WBIC	2631600
		County	Polk
		Township Name	Johnstown
Date and Time of Monitoring			
Start Date	8/19/16	Start Time	10:30 AM
		End Date (= Start Date)	8/19/16
		End Time	10:40 PM
Monitoring Results			
Method used:	<input type="checkbox"/> horizontal tows (near surface) <input type="checkbox"/> oblique tows (thermocline to surface) <input type="checkbox"/> vertical tows (bottom to surface)		
Diameter of plankton net opening	30cm 50cm other _____ (circle one)		
Site 1: Latitude (optional):	45° 29.449	Longitude (optional):	092° 10.577
Secchi depth (ft)	5ft (optional)	Depth sampled (if vertical or oblique tow)	13 m ft/m circle one
Site 2: Latitude (optional):		Longitude (optional):	
Secchi depth (m)		Depth sampled (if vertical or oblique tow)	
Site 3: Latitude (optional):		Longitude (optional):	
Secchi depth (m)		Depth sampled (if vertical or oblique tow)	
<input checked="" type="checkbox"/> Have you consolidated all of your samples into one composite bottle? ziplock			
<input checked="" type="checkbox"/> Have you sent your samples to the DNR Plymouth Service Center? Alex Smith			
During this monitoring trip, did you find what you suspect are Spiny or Fishhook Waterfleas in this waterbody? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Voucher Sample			
If you found Spiny or Fishhook Water fleas, did you collect a voucher specimen and bring it to your local DNR office? If so, which office?			
<input type="checkbox"/> Rhinelander	<input type="checkbox"/> Spooner	<input type="checkbox"/> Green Bay	<input type="checkbox"/> Oshkosh
<input type="checkbox"/> Fitchburg	<input type="checkbox"/> Waukesha	<input type="checkbox"/> Eau Claire	<input type="checkbox"/> Superior
<input type="checkbox"/> Did not take sample to a DNR office <input type="checkbox"/> Other Office: _____			

ekman dredge at deep hole

If you find Spiny or Fishhook Water Fleas

Please bring a copy of this form, along with a voucher specimen and if possible, a map showing where you found the suspect waterfleas to your regional Citizen Lake Monitoring Coordinator at the DNR. All initial discoveries should be placed in rubbing alcohol until verification by an expert is obtained.

If you don't Find Spiny or Fishhook Water Fleas

If you submit your data online, that is all you need to do. Otherwise, please mail a copy to your regional DNR Citizen Lake Monitoring coordinator. <http://dnr.wi.gov/lakes/contacts>

For DNR staff to fill out	
Volume of sample that was analyzed (ml)	Date analyzed
Name of plankton sample analyst:	
Name of person or museum who identified the voucher specimen	
Was the specimen confirmed as....?	
Spiny Waterflea?	<input type="checkbox"/> Yes <input type="checkbox"/> No Fishhook Waterflea? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you entered the results of the voucher in SWIMS? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DNR staff: Please enter voucher information for new AIS findings into SWIMS under the Incident Report Project for your county (Choose Incident Report Form in SWIMS). Enter date of sampling for "Start Date", Person who identified specimen as "Data Collector", and Monitoring location as "Station".	