Official Entry Form (Please Print)

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	(Please Print)
33 1.	Name of Angler Mark Noble
2	Address: Street /
3000	City St. Simons To and State Scorged
3.	Name of Fish Bull Shark
355 4.	Weight (lbs. and oz.) 455 /bs. Total Length (ft. and in.)
3. 4. 6. 8.	Date of Catch 7/9/78 7. Bait or Lure Used Pup Shark
8.	Type of Fishing (check one)
30000	Private Boat (V) Name of Boat
5000	Party or Charter Boat () Name of Boat
3000	Pier or Bridge () Name of Pier
83333	Surf or Shore ()
9.	Location of Catch (be as specific as possible) Between STS and
3000	bougs 1 + 2 of St. Simons Channel
10.	Name of Weigh Station Golden Isles Marina.
XXXXXXXX	Meighmaster's Signature
0000	Angler's Certification
I certify that the above statements	
are	true.
2000	Hard Blackshoon
Dat	e Witness to Weighing
I ce are Dat Sign	nature of Angler Witness to Catch
Mail this form to: Department of Natural Resources	
SOC	Coastal Resources Program
933	Bill Morehead 1200 Glynn Avenue
cocca	Brunswick, GA 31520