

Only use this form if you found an aquatic invasive plant on a lake where it hasn't been found previously.

Personally identifiable information collected on this form will be incorporated into the DNR aquatic invasive species 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, s. 19.32 - 19.39, Wis. Stats.

| Primary Data Collector | | | | |
|--|-------------------|-----------------------|-------------------|-------------------------------|
| Name | | Phone Number | | Email |
| Monitoring Location | | | | |
| Waterbody Name | | Township Name | | County |
| Boat Landing (if you only monitor at a boat landing) | | | | |
| Date and Time of Monitoring | | | | |
| Monitoring Date | Start Time | End Time | | |
| Information on the Aquatic Invasive Plant Found | | | | |
| Which aquatic invasive plant did you find?: | | | | |
| <input type="checkbox"/> Curly-leaf Pondweed <input type="checkbox"/> Eurasian Water-milfoil <input type="checkbox"/> Hydrilla <input type="checkbox"/> Other _____ | | | | |
| Where did you find the invasive plant? | | | | |
| Latitude | | Longitude | | |
| Approximately how large an area do the plants occupy? | | | | |
| <input type="checkbox"/> A Few Plants <input type="checkbox"/> One or a few beds <input type="checkbox"/> Many beds <input type="checkbox"/> A Whole Bay or Portion of Lake <input type="checkbox"/> Widespread, covering most shallow areas of lake <input type="checkbox"/> Don't know (e.g. didn't check the whole lake) | | | | |
| Was the plant floating or rooted? | | | | |
| <input type="checkbox"/> Floating <input type="checkbox"/> Rooted | | | | |
| Estimated percent cover in the area where the invasive was found (Optional) | | | | |
| Substrate cobble, % | Substrate muck, % | Substrate boulders, % | Substrate sand, % | Bottom covered with plants, % |
| Voucher Sample | | | | |
| Did you collect a sample of the plant (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"/> Did not take plant sample to a DNR office <input type="checkbox"/> Fitchburg <input type="checkbox"/> Waukesha <input type="checkbox"/> Eau Claire <input type="checkbox"/> Superior <input type="checkbox"/> Other Office _____ | | | | |

Please collect a sample and bring a copy of this form, along with the sample and a map showing where you found the suspect plants to your regional Citizen Lake Monitoring Coordinator at the DNR.

| For DNR staff to fill out | | |
|---|--|---|
| Name of person or herbarium who identified the voucher specimen | | |
| Was the specimen confirmed as....? | | |
| Eurasian Water-Milfoil? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Curly-leaf Pondweed? <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 |
| <i>DNR staff: Please enter voucher information into SWIMS under the AIS Voucher project for your region. Enter date of sampling for "Start Date", Person who identified specimen as "Data Collector", and Monitoring location as "Station".</i> | | |