

Wildlife Resource Document

Refer to **Outdoor Annual** sections on *Transfer of Wildlife Resources*, *Cold Storage/Processing Facility*, and *Taxidermist* for an explanation of requirements to complete and possess this document.

I, _____, _____
(1) Name (2) Phone
_____, _____, _____, _____
(3) Address City State Zip

give, donate, leave the wildlife resource(s) or parts thereof, listed below to: (complete Sections 4 thru 12), **OR** possess the wildlife resource(s) or parts thereof, listed below, without other applicable licenses, stamps, tags, or permits (complete Sections 6 thru 12):

Rafter T Taxidermy

301 N Traylor Ave, Rockport, TX 78382

(6) Number and Type of Species or Parts
which was killed or caught on _____ at the following location:
(7) Date

(8) Name of Ranch, Area, Lake, Bay, or Stream and County, State, or Country

_____, _____
(9) Hunt and/or Fish License of person who killed or caught the wildlife resource described in Section 8 (10) State

(11) Signature (12) Date

Circle One

½ Life Size	Shoulder Mount	Wall Pedestal	Soft Tan
Life Size	European	Floor Pedestal	Antler Mount

Pose- _____

Special Instructions- _____

Horn Repair - Yes / No

Tan Back Hide- Yes / No

CC Info - _____