DEPARTMENT OF HOMELAND SECURITY
U.S. COAST GUARD

OFFENSE INVESTIGATION REPORT (SUPPLEMENT)

1. Computer Control Number *(NMFS Only)*	2. Date of Report	3. Enforcement Action Report Number	Check Appropriate Box: ☐ Continuation Report ☐ Supplemental Report

Name of Subject *(Last, First, MI)*	Vessel Name

Violation(s) Summary *(Give a complete statement of facts following the listing of all violations)*

COUNT NO. (a)	TYPE CODE (b)	DATE & TIME OF VIOLATION (c)	REGULATION OR STATUE NO. (d)	PLACE OF VIOLATION (e)	FISH. PLAN OR VIOL. CODE (f)	ILLEGAL CATCH CODES (g)	QUANTITY *(Ea., Lb., Kg., MT., or ST.)* (h)
		/					

Summary:

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

_____ *(Signature)*

Executed on: _____ *(Date)*

Officer's Name	ID Number	Duty Station/Vessel

CASE FILE COPY

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		/					

Summary:

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

(Signature) Executed on: *(Date)*

Officer's Name	ID Number	Duty Station/Vessel

SUPERVISOR'S COPY

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		/					

Summary:

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

_____ *(Signature)*

Executed on: _____ *(Date)*

Officer's Name	ID Number	Duty Station/Vessel

DUTY STATION/VESSEL COPY

DEPARTMENT OF HOMELAND SECURITY
U.S. COAST GUARD

OFFENSE INVESTIGATION REPORT (SUPPLEMENT)

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		/					

Summary:

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(Signature) Executed on: *(Date)*

Officer's Name	ID Number	Duty Station/Vessel

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DEPARTMENT OF HOMELAND SECURITY
U.S. COAST GUARD

OFFENSE INVESTIGATION REPORT

(Supplement)