Buffalo Ornithological Society Verification Form for Unusual Sightings

This form is meant to be an aid in reporting observations. You may use it flexibly. When completed, send to the BOS Compiler.

Observers are encouraged to review a good field guide's description of an unusual bird while it is actually under observation in the field, so that each important field mark may be looked for and checked on the spot.

| Name of bird: | Date seen: |
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| 1. Number of indiv | viduals: |
| 2. Locality: | |
| 3. Time of observa | ntion: |
| 4. Observers (verifidentified it as this | fying reporter's name first). Underline the names of any who independently species: |
| 5. Light conditions (a) general | s: - sunny; light, medium, or dark clouds, etc. |
| (b) Where v | was the bird? - in the open; in light, medium, or dark clouds, etc. |
| | was the sun as you faced the bird? - Assume you are standing on the center of a clock and the bird is at 12 o'clock; over what number is the sun? |
| 6. Optical equipme | ent used: |
| 7. Distance at which | ch seen, and how judged (estimated, paced, etc.): |
| 8. What was the bi | ird doing? (flying, resting, feeding, etc.): |
| 9. Position of the b | pird in relation to observer including height relative to eye level: |
| | eral: cific: |

| 11. Length of time studied under above combination of conditions: |
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| 12. Thorough and detailed description of <i>exactly</i> what you saw in the field, giving size, shape, and color pattern of the bird and all its parts, including plumage, beak and legs: (If you have an original sketch made at the time of observation or photographs, please attach them.) |
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| 13. Similar or confusing species that you are satisfied have been eliminated by your description: |
| 14. Describe your observation of any diagnostic habits: |
| 15. Description of song and calls: |
| 16. Previous experience with this species (about how many times have you observed it?) |
| 17. Signature and address of verifying reporter: |
| 18. Date and time of writing this account: |
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