

ORPHAN CONTAINER ASSESSMENT PHOTO PLACARD

DATE: _____ TIME ARRIVED: _____ TIME DEPARTED: _____

ORPHAN CONTAINER ASSESSMENT TEAM # - _____

SITE # - _____ COUNT ITEM No. PHOTO No.

DESCRIPTION:

LOCATION / ADDRESS: _____

LAT: ____ . _____ LONG: ____ . _____

PHOTOGRAPHER: _____