State of Wisconsin
Department of Natural Resources
Captive Wildlife Program LE/8
PO Box 7921, Madison WI 53707
dnr.wi.gov

Wild Fur Farm Quarterly Report

Form 9400-581 (R 03/23)

						Year	License N	Number		
departmer suspensio Dept. may Wis. Stats Note: Qua	nt. Penalties n. Personal provide this .].	s for failure to submit reports ma information collected will be us s information to requesters as re	y include forfe ed for progran equired by Wis	rm quarterly reports must be submitted to the orfeitures of up to \$500 and license revocation or ram administration and enforcement purposes. The Wisconsin's Public Records law [ss. 19.31 - 19.39, involving otter, mink, skunk, coyote or weasel.		Quarter Covered January 1 - March 31 April 1 - June 30 July 1 - Sepember.30 October 1 - December 31 Daytime Telephone Number	Due Date April 30 July 31 October 31 January 31 Alternate Telephone Number			
Street Address				City			State	ZIP Code		
Section I	: LIVE Anir	mals SOLD, or otherwise TRA	ANSFERRED	TO ANOTHER. You must record each	TRANSA	ACTION.				
Date	No. of Animals			Sold or Transferred To						
		Species	Sex / Age	Name		Address		WI-DNR Captive Wildlife License No.		

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Section II:	DEAD ANIM	ALS: KILLED BY TRAPPING, O	R SOLD, SHIPPE	D or otherv	vise TRANSFER	RED (including carcasses	, pelts or part	ts)		
	No. of		If Not Whole,	Sex / Age	Sold or Transferred To					
Date	Animals or Parts	Species	Describe Part			Name		Address		
O and and H	-		10.1	Dete of	this Bound					
		als, Carcasses or Parts Possess	sed By Licensee	on Date of						
No. of Ani		Species	If Not Whole, Describe Part	Sex / Age	No. of Animals or Parts	Species		If Not Whole, Describe Part	Sex / Age	
					_					
		oing information is true and correct	t. I understand that	t providing in	correct informatio	n may result in revocation of	f my license an	d possible penaltie	es.	
Signature	of Licensee						Date Signed	d		