**Name** ....................................  **BRAES ESTATE Tel** ....................................

**Address** ...................................PORTREE ANGLING ASSOCIATION **Email** ..........................................

**No of days equivalent effort**\* …………… Fishing Returns - **R. VARRAGIL**

**SALMON GRILSE SEA FINNOCK**

**TROUT**

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| Month | R | Fmd | Lbs | R | Fmd | Lbs | R | Lbs | R | Lbs | REMARKS ( Pool, Fly etc) |
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\*Marine Scotland require this information – A day equivalent is defined as 8 hours

**PLEASE RETURN THIS COMPLETED FORM TO;** MRS CB LESLIE. REDCLIFF. PORTREE. ISLE OF SKYE. IV51 9DH. Tel. 01478 612014