**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