

#:	Id:		Comments:				<input type="checkbox"/> Logo/Brand <input type="checkbox"/> Language <input type="checkbox"/> Collected <input type="checkbox"/> Barcode <input type="checkbox"/> Poison		
Veg: _____	L (cm):	W (cm):	H (cm):	Color:	Material: _____	<input type="checkbox"/> Biofoul:	Loops →	1   2-10   10s   100s	Container: openings: 0            1   2+ ↓            ↓   ↓ filling:        diam:(cm) air   other
Wood: _____				Complex: N   Y	<i>if plastic:</i>	<input type="checkbox"/>	Crumbly	↓        ↓        ↓	
Bare: _____				↓	hard foam soft	<input type="checkbox"/>	Beak	↓        ↓        ↓	
Wrack: _____	Weathering:			Intact:	_____	<input type="checkbox"/>	Sharp	diam: (cm)    diam: (cm)	
Surf: _____	low	med	high	whole   part   frag		<input type="checkbox"/>	Shiny		
						<input type="checkbox"/>	Floppy		

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