Herbarium Specimen Collection Record Collection number: Date collected: Species: Vascular plant / Moss / Lichen / Macroalgae / Other Silica gel collection: yes/no Photograph: yes/no Specimen Notes: Species abundance at site: **Collector(s):** or, same collectors as collection number (______) **Site Information:** or, same site as collection number (Country: _____ Prov./Territory: ____ Locality: Latitude: ______ N/S Longitude: _____ E/W Elevation: _____ m. Uncertainty: _____ m. GPS Datum:WGS84 or Waypoint no: **Habitat Info:** or, same habitat as collection number (**Associates:** or, same associates as collection number (

Herbarium Specimen Collection Record

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Vascular	plant / Moss / I	ichen / Macroalgae / Other	
Silica gel colle	ction: yes/no	Photograph: yes/no	
Specimen Not	tes:		
Species abund	dance at site:		
Collector(s): o	or, same collecto	rs as collection number (
Site Informati	ion: or, same si	te as collection number (
Country:	P	rov./Territory:	
Locality:			
	N/S	Longitude:	E/
Latitude:		Longitude: Uncertainty:	
Latitude: Elevation:	m.		

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