



# Compton Traditional Bowhunters

Traditional Bowhunting Archives

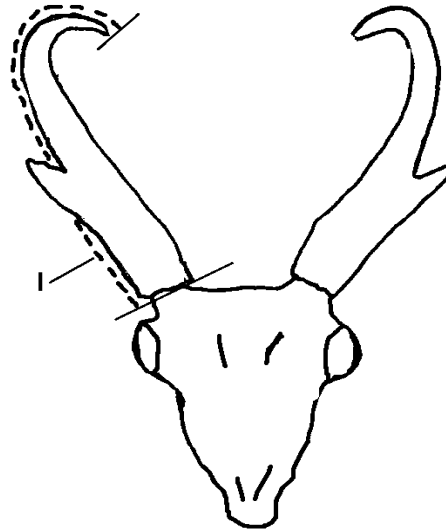
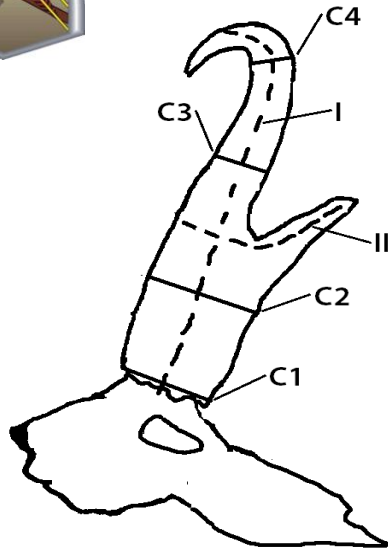
Sex (Check one)

 Male

 Female

## PRONGHORN ANTELOPE

Minimum Compton Points: 63 \*All Measurements taken to the nearest 1/8"



	Right Horn	Left Horn
I. Length of Horn		
C-1 Circumference of Horn Base		
C-2 Circumference of Horn at First Quarter <b>BELOW</b> Prong (This measurement taken at _____ inches from base)		
C-3 Circumference of Horn at Second Quarter <b>ABOVE</b> Prong (This measurement taken at _____ inches from base)		
C-4 Circumference of Horn at Third Quarter (This measurement taken at _____ inches from base)		
II. Length of Prong		
III. Sub Total of Right and Left Horns		
IV. Total Animal Score - Add line III. Right and Left Horn sub totals		

Compton hunting method point Calculation (place an X in the shaded box to the left of the appropriate method, the correct value will be added)						
V. Bow Used;	<input type="checkbox"/>	Recurve = 0	<input type="checkbox"/>	Longbow = 1	<input type="checkbox"/>	Selfbow = 2 (Check only one box per row)
VI. Arrow Used;	<input type="checkbox"/>	Aluminum = 0	<input type="checkbox"/>	Carbon = 0	<input type="checkbox"/>	Self Made Wood = 1 (Check only one box per row)
VII. Hunting Method;	<input type="checkbox"/>	Elev. Stand = 0	<input type="checkbox"/>	Stalking = 3	<input type="checkbox"/>	Ground Blind = 1 (Check only one box per row)
VIII. Guided / Unguided;	<input type="checkbox"/>	Guided = 0	<input type="checkbox"/>		<input type="checkbox"/>	Unguided = 1 (Check only one box per row)
IX. Compton Hunting Method Point Sub Total (Add lines V through VIII)						

I certify that the above animal was measured in accordance with the Compton Traditional Bowhunting Archives Method and that the data is correct to the best of my Knowledge

<b>Compton Point Total (Add lines IV &amp; IX)</b>	
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Official Measurer's Name, Address & Phone Number:

Hunters Name:

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Please Print Clearly)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Date Measured)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(CTB Official Measurer Signature)

\_\_\_\_\_  
(Measurers Phone)

For Archives office use only:	
Amount Paid:	Check #
Date Entered:	
Date Cert Mailed	