

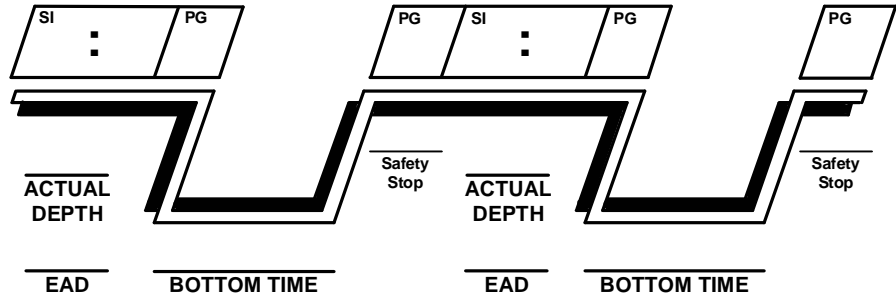


Dive No. _____ Date _____

Location _____

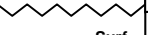
 START (psi) _____	Time (IN) _____ : _____	Time (OUT) _____ : _____	 END (psi) _____
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Air Blend _____%	NDL _____	Air Blend _____%	NDL _____
O2pp _____ata	RNT * _____	O2pp _____ata	RNT * _____
O2 Expos _____%	ABT + _____	O2 Expos _____%	ABT + _____
Prev O2 Expo + _____%	TBT = _____	Prev O2 Expo + _____%	TBT = _____
Tot O2 Expo = _____%		Tot O2 Expo = _____%	

Verification Signature: _____	Bottom Time to Date _____
<input type="checkbox"/> Instructure <input type="checkbox"/> Divemaster <input type="checkbox"/> Buddy	Time This Dive _____
Certification No. _____	Cum Time _____



Environment <input type="checkbox"/> Ocean <input type="checkbox"/> Cold Water <input type="checkbox"/> Tropical <input type="checkbox"/> Quarry <input type="checkbox"/> Lake <input type="checkbox"/> River	Dive Type <input type="checkbox"/> Boat Dive <input type="checkbox"/> Beach Dive <input type="checkbox"/> Drift Dive <input type="checkbox"/> Multi-Level <input type="checkbox"/> Training <input type="checkbox"/> Deep Dive <input type="checkbox"/> Night Dive <input type="checkbox"/> Altitude Dive <input type="checkbox"/> Ice Dive	Activities <input type="checkbox"/> Wreck Dive <input type="checkbox"/> Reef Dive <input type="checkbox"/> Cave Dive <input type="checkbox"/> Training <input type="checkbox"/> Search & Recov <input type="checkbox"/> UW Photo <input type="checkbox"/> UW Nav <input type="checkbox"/> UW Naturalist <input type="checkbox"/> UW Research
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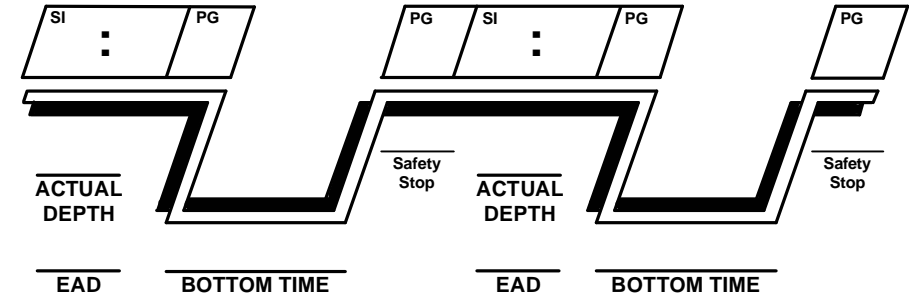
Conditions <input type="checkbox"/> Calm <input type="checkbox"/> Choppy <input type="checkbox"/> Swells <input type="checkbox"/> Current _____ Knts	Tide <input type="checkbox"/> High <input type="checkbox"/> Low <input type="checkbox"/> Slack <input type="checkbox"/> Freshwater <input type="checkbox"/> Saltwater	Weather <input type="checkbox"/> Sunny <input type="checkbox"/> Cloudy <input type="checkbox"/> Foggy <input type="checkbox"/> Raining <input type="checkbox"/> Windy	Temp _____ Air  _____ Surf _____ Bot	Visibility _____ ft Weight _____ lbs	Wet Suit <input type="checkbox"/> Full _____ ml <input type="checkbox"/> Shorty _____ ml <input type="checkbox"/> Hood _____ ml <input type="checkbox"/> Gloves _____ ml <input type="checkbox"/> None
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Comments: (Aquatic Life, Underwater Geography/Topography) _____

Dive No. _____ Date _____

Location _____

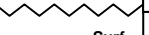
 START (psi) _____	Time (IN) _____ : _____	Time (OUT) _____ : _____	 END (psi) _____
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Air Blend _____%	NDL _____	Air Blend _____%	NDL _____
O2pp _____ata	RNT * _____	O2pp _____ata	RNT * _____
O2 Expos _____%	ABT + _____	O2 Expos _____%	ABT + _____
Prev O2 Expo + _____%	TBT = _____	Prev O2 Expo + _____%	TBT = _____
Tot O2 Expo = _____%		Tot O2 Expo = _____%	

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Certification No. _____	Cum Time _____



Environment <input type="checkbox"/> Ocean <input type="checkbox"/> Cold Water <input type="checkbox"/> Tropical <input type="checkbox"/> Quarry <input type="checkbox"/> Lake <input type="checkbox"/> River	Dive Type <input type="checkbox"/> Boat Dive <input type="checkbox"/> Beach Dive <input type="checkbox"/> Drift Dive <input type="checkbox"/> Multi-Level <input type="checkbox"/> Training <input type="checkbox"/> Deep Dive <input type="checkbox"/> Night Dive <input type="checkbox"/> Altitude Dive <input type="checkbox"/> Ice Dive	Activities <input type="checkbox"/> Wreck Dive <input type="checkbox"/> Reef Dive <input type="checkbox"/> Cave Dive <input type="checkbox"/> Training <input type="checkbox"/> Search & Recov <input type="checkbox"/> UW Photo <input type="checkbox"/> UW Nav <input type="checkbox"/> UW Naturalist <input type="checkbox"/> UW Research
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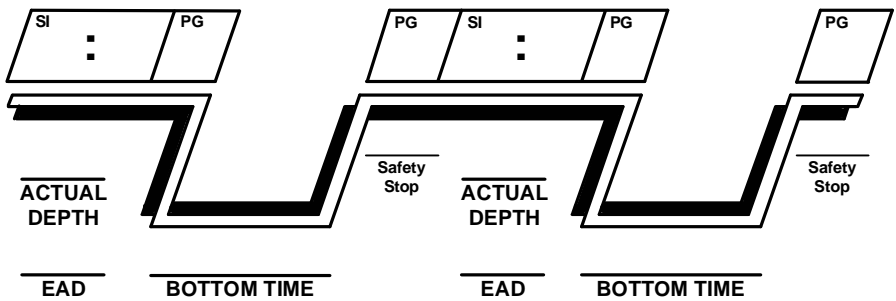
Conditions <input type="checkbox"/> Calm <input type="checkbox"/> Choppy <input type="checkbox"/> Swells <input type="checkbox"/> Current _____ Knts	Tide <input type="checkbox"/> High <input type="checkbox"/> Low <input type="checkbox"/> Slack <input type="checkbox"/> Freshwater <input type="checkbox"/> Saltwater	Weather <input type="checkbox"/> Sunny <input type="checkbox"/> Cloudy <input type="checkbox"/> Foggy <input type="checkbox"/> Raining <input type="checkbox"/> Windy	Temp _____ Air  _____ Surf _____ Bot	Visibility _____ ft Weight _____ lbs	Wet Suit <input type="checkbox"/> Full _____ ml <input type="checkbox"/> Shorty _____ ml <input type="checkbox"/> Hood _____ ml <input type="checkbox"/> Gloves _____ ml <input type="checkbox"/> None
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Location _____

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O2 Expos _____%	ABT + _____	O2 Expos _____%	ABT + _____
Prev O2 Expo + _____%	TBT = _____	Prev O2 Expo + _____%	TBT = _____
Tot O2 Expo = _____%		Tot O2 Expo = _____%	

Verification Signature: _____

Instructure Divemaster Buddy

Certification No. _____

Bottom Time to Date _____

Time This Dive _____



Cum Time _____

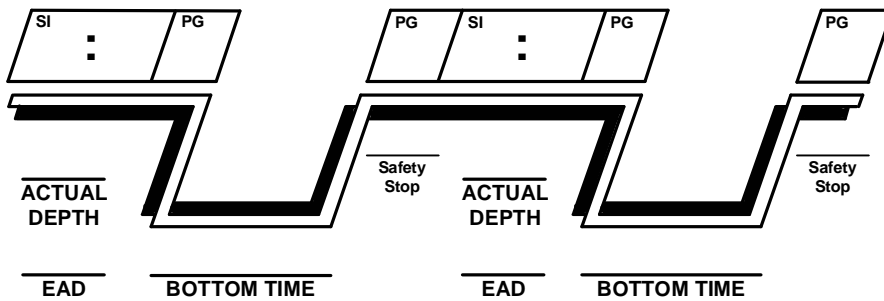
Environment <input type="checkbox"/> Ocean <input type="checkbox"/> Tropical <input type="checkbox"/> Quarry <input type="checkbox"/> Lake <input type="checkbox"/> River	<input type="checkbox"/> Cold Water	Dive Type <input type="checkbox"/> Boat Dive <input type="checkbox"/> Beach Dive <input type="checkbox"/> Drift Dive <input type="checkbox"/> Multi-Level <input type="checkbox"/> Training	<input type="checkbox"/> Deep Dive <input type="checkbox"/> Night Dive <input type="checkbox"/> Altitude Dive <input type="checkbox"/> Ice Dive	Activities <input type="checkbox"/> Wreck Dive <input type="checkbox"/> Reef Dive <input type="checkbox"/> Cave Dive <input type="checkbox"/> Training <input type="checkbox"/> Search & Recov	<input type="checkbox"/> UW Photo <input type="checkbox"/> UW Nav <input type="checkbox"/> UW Naturalist <input type="checkbox"/> UW Research
Conditions <input type="checkbox"/> Calm <input type="checkbox"/> Choppy <input type="checkbox"/> Swells <input type="checkbox"/> Current _____ Knts	Tide <input type="checkbox"/> High <input type="checkbox"/> Low <input type="checkbox"/> Slack <input type="checkbox"/> Freshwater <input type="checkbox"/> Saltwater	Weather <input type="checkbox"/> Sunny <input type="checkbox"/> Cloudy <input type="checkbox"/> Foggy <input type="checkbox"/> Raining <input type="checkbox"/> Windy	Temp _____ Air _____ Surf _____ Bot	Visibility _____ ft Weight _____ lbs	Wet Suit <input type="checkbox"/> Full _____ ml <input type="checkbox"/> Shorty _____ ml <input type="checkbox"/> Hood _____ ml <input type="checkbox"/> Gloves _____ ml <input type="checkbox"/> None

Comments: (Aquatic Life, Underwater Geopgraphy/Topography) _____

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O2 Expos _____%	ABT + _____	O2 Expos _____%	ABT + _____
Prev O2 Expo + _____%	TBT = _____	Prev O2 Expo + _____%	TBT = _____
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Instructure Divemaster Buddy

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Cum Time _____

Environment <input type="checkbox"/> Ocean <input type="checkbox"/> Tropical <input type="checkbox"/> Quarry <input type="checkbox"/> Lake <input type="checkbox"/> River	<input type="checkbox"/> Cold Water	Dive Type <input type="checkbox"/> Boat Dive <input type="checkbox"/> Beach Dive <input type="checkbox"/> Drift Dive <input type="checkbox"/> Multi-Level <input type="checkbox"/> Training	<input type="checkbox"/> Deep Dive <input type="checkbox"/> Night Dive <input type="checkbox"/> Altitude Dive <input type="checkbox"/> Ice Dive	Activities <input type="checkbox"/> Wreck Dive <input type="checkbox"/> Reef Dive <input type="checkbox"/> Cave Dive <input type="checkbox"/> Training <input type="checkbox"/> Search & Recov	<input type="checkbox"/> UW Photo <input type="checkbox"/> UW Nav <input type="checkbox"/> UW Naturalist <input type="checkbox"/> UW Research
Conditions <input type="checkbox"/> Calm <input type="checkbox"/> Choppy <input type="checkbox"/> Swells <input type="checkbox"/> Current _____ Knts	Tide <input type="checkbox"/> High <input type="checkbox"/> Low <input type="checkbox"/> Slack <input type="checkbox"/> Freshwater <input type="checkbox"/> Saltwater	Weather <input type="checkbox"/> Sunny <input type="checkbox"/> Cloudy <input type="checkbox"/> Foggy <input type="checkbox"/> Raining <input type="checkbox"/> Windy	Temp _____ Air _____ Surf _____ Bot	Visibility _____ ft Weight _____ lbs	Wet Suit <input type="checkbox"/> Full _____ ml <input type="checkbox"/> Shorty _____ ml <input type="checkbox"/> Hood _____ ml <input type="checkbox"/> Gloves _____ ml <input type="checkbox"/> None

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