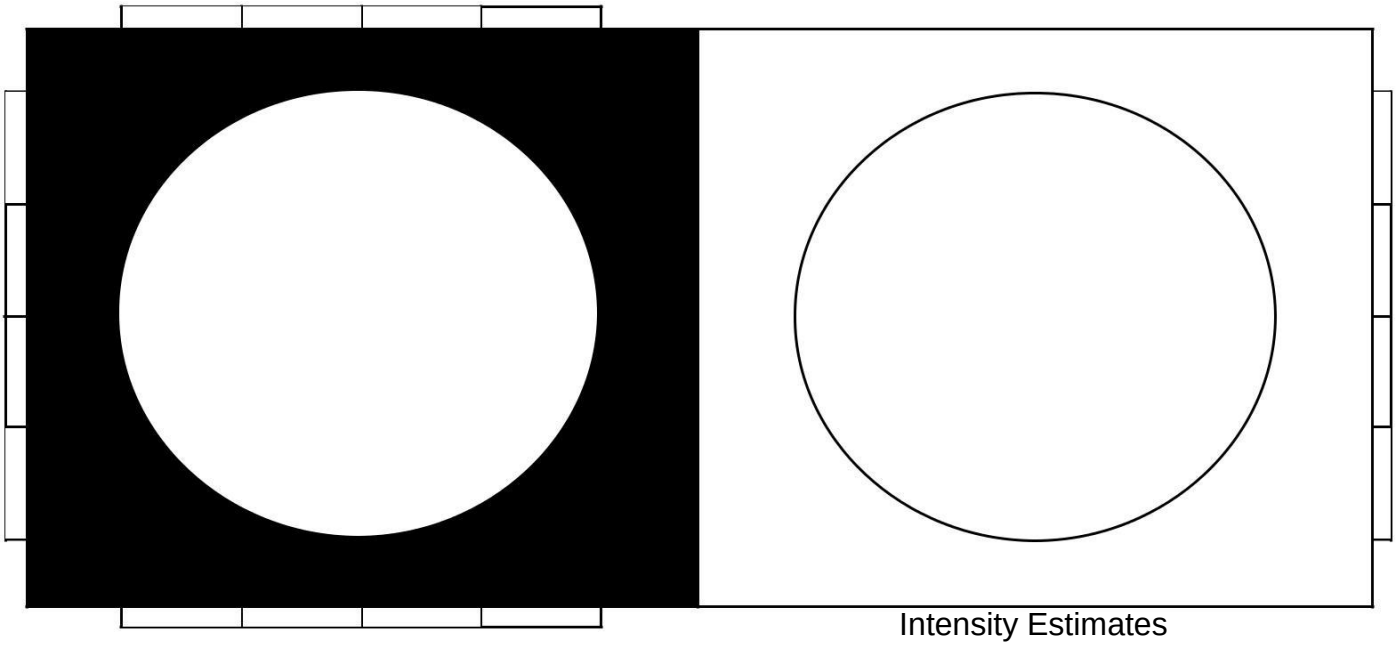
Mercury Observation Form



Intensity Estimates

Date(U.T.):_____
Time (U.T.):_____
L1: _____ L2:_____ L3:_____
Instrument:_____
Magnification:_____x _____x _____x
Filters (Wratten):_____
Seeing (1-10):_____ Antoniadi (I-V):____
Transparency (1-6):_____
Name:_____
Address:_____
_____
_____

No.	Time (U.T.)	Comments