W. B. FORM 612-14 — U. S. DEPARTMENT OF COMMERCE, WEATHER BUREAU — (REVISED 1950)

Station Tahoma — County Pierce — State Washington

RECORD OF CLIMATOLOGICAL OBSERVATIONS

Time of observation (local time) if once daily 9A; if at different times, temperature _____, precipitation _____

Month August, 1941 — Standard time in use Daylight Saving

26 5890 4

Date	TEMPERATURE °F: 24 hrs. ending at observation — Max.	Min.	At obsn.	PRECIPITATION: Draw a straight line (—) through hours precipitation was observed, and a waved line (~) through hours precip. probably occurred unobserved. (A.M. 1 2 3 4 5 6 7 8 9 10 11 NOON 1 2 3 4 5 6 7 8 9 10 11 P.M.)	24-hr. amounts: Rain, Melted snow, etc. (ins. & hundredths)	Snow, Sleet, Hail (ins. & tenths)	At obsn.: Snow, Sleet, Hail, Ice on ground (inches)	WEATHER (CALENDAR DAY): Mark 'X' for all types occurring each day: Fog	Sleet	Glaze	Thunder	Hail	Damaging Wind	Time of Obsn. if different from the above	Important weather conditions not included in 'Weather' block; remarks, etc.
1	79	46	60														
2	74	44	64														
3	82	45	72														
4																	
5	95	53	78														
6	94	55	89														
7	95	55	75														
8	95	56	80														
9	95	59	79														
10	93	51	80														
11		54															
12	96	54	75														
13	100	60	85														
14	105	65	89														
15	106	69	89														
16	107	69	89														
17	109	67	89														
18																	
19	109	65	89														
20	113	69	90														
21	115	65	91	65													
22	110	72	90	70													
23	110	67	87														
24	109	69	89														
25	~~113~~	~~70~~	~~89~~														
26	113	70	81														
27	108	67	90														windy
28	104	70	87	70													windy
29	102	65	87														
30	99	54	78	54 78													
31		54															
Sum				Sum													
Avg																	
Extreme				Greatest													

Observer G. L. Jensen

Post Office Tahoma, Wash.

Fog | Sleet | Glaze | Thunder | Hail | Damaging Wind

Check ☐ when additional sheet is used for remarks

List forms or supplies needed _____

Station _____ Month _____, 19__