

DDF-B:2:09

DATA DOCUMENTATION FORM

TR-0139

NOAA FORM 24-13 (4-73)

U.S. DEPARTMENT OF COMMERCE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION  
NATIONAL OCEANOGRAPHIC DATA CENTER  
RECORDS SECTION  
ROCKVILLE, MARYLAND 20852

FORM APPROVED  
O.M.B. No. 41-R2651

TT1329 - TT1332

This form should accompany all data submissions to NODC. Section A, Originator Identification, must be completed when the data are submitted. It is highly desirable for NODC to also receive the remaining pertinent information at that time. This may be most easily accomplished by attaching reports, publications, or manuscripts which are readily available describing data collection, analysis, and format specifics. Readable, handwritten submissions are acceptable in all cases. All data shipments should be sent to the above address.

A. ORIGINATOR IDENTIFICATION

THIS SECTION MUST BE COMPLETED BY DONOR FOR ALL DATA TRANSMITTALS

1. NAME AND ADDRESS OF INSTITUTION, LABORATORY, OR ACTIVITY WITH WHICH SUBMITTED DATA ARE ASSOCIATED

PMEL/NOAA  
3711 15th NE  
Seattle, Washington 98105

2. EXPEDITION, PROJECT, OR PROGRAM DURING WHICH DATA WERE COLLECTED

OCSEAP - Gulf of Alaska

3. CRUISE NUMBER(S) USED BY ORIGINATOR TO IDENTIFY DATA IN THIS SHIPMENT

File ID = 61

4. PLATFORM NAME(S)

61

5. PLATFORM TYPE(S)  
(E.G., SHIP, BUOY, ETC.)

Buoy

6. PLATFORM AND OPERATOR NATIONALITY(IES)

PLATFORM	OPERATOR
U.S.	U.S.

7. DATES

FROM: MO/DAY/YR	TO: MO/DAY/YR
8/16/74	11/21/74

8. ARE DATA PROPRIETARY?

NO  YES

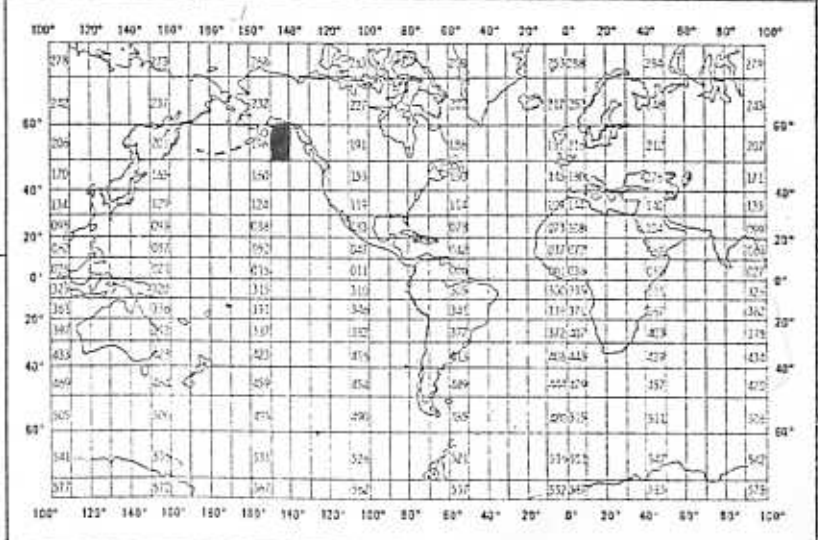
IF YES, WHEN CAN THEY BE RELEASED FOR GENERAL USE? YEAR \_\_\_\_\_ MONTH \_\_\_\_\_

11. PLEASE DARKEN ALL MARSDEN SQUARES IN WHICH ANY DATA CONTAINED IN YOUR SUBMISSION WERE COLLECTED.

GENERAL AREA

9. ARE DATA DECLARED NATIONAL PROGRAM (DNP)?  
(I.E., SHOULD THEY BE INCLUDED IN WORLD DATA CENTERS HOLDINGS FOR INTERNATIONAL EXCHANGE?)

NO  YES  PART (SPECIFY BELOW)



10. PERSON TO WHOM INQUIRIES CONCERNING DATA SHOULD BE ADDRESSED WITH TELEPHONE NUMBER (AND ADDRESS IF OTHER THAN IN ITEM-1)

Mr. Pat Laird  
(206) 442-4580

B. SCIENTIFIC CONTENT

NAME OF DATA FIELD	REPORTING UNITS OR CODE	METHODS OF OBSERVATION AND INSTRUMENTS USED (SPECIFY TYPE AND MODEL)	ANALYTICAL METHODS (INCLUDING MODIFICATIONS) AND LABORATORY PROCEDURES	DATA PROCESSING TECHNIQUES WITH FILTERING AND AVERAGING
SPEED	CM/SEC	Aanderaa Current Meter	N/A	N/A
U-Direction	CM/SEC	RCM-4	"	"
V-Direction	CM/SEC	"	"	"
TEMPERATURE	°C	"	"	"
CONDUCTIVITY	°/∞∞	"	"	"
PRESSURE	DECIBARS	"	"	"

COMPLETE THIS SECTION FOR PUNCHED CARDS OR TAPE, MAGNETIC TAPE, OR DISC SUBMISSIONS.

1. LIST RECORD TYPES CONTAINED IN THE TRANSMITTAL OF YOUR FILE  
GIVE METHOD OF IDENTIFYING EACH RECORD TYPE

Three (3) record types, text record (1), meter master record (2), and detail record (3), differentiated by byte 10.

2. GIVE BRIEF DESCRIPTION OF FILE ORGANIZATION

[Empty box for file organization description]

3. ATTRIBUTES AS EXPRESSED IN  PL-1  ALGOL  COBOL  
 FORTRAN  \_\_\_\_\_ LANGUAGE

4. RESPONSIBLE COMPUTER SPECIALIST: Donna Bendiner (206) 543-2007  
NAME AND PHONE NUMBER  
ADDRESS Dept. of Oceanography, University of Washington, Seattle, Wa, 98105

COMPLETE THIS SECTION IF DATA ARE ON MAGNETIC TAPE

<p>5. RECORDING MODE</p> <input checked="" type="checkbox"/> BCD <input type="checkbox"/> BINARY <input type="checkbox"/> ASCII <input type="checkbox"/> EBCDIC <input type="checkbox"/> _____	<p>9. LENGTH OF INTER-RECORD GAP (IF KNOWN) <input checked="" type="checkbox"/> 3/4 INCH  <input type="checkbox"/> _____</p>
<p>6. NUMBER OF TRACKS (CHANNELS)</p> <input checked="" type="checkbox"/> SEVEN <input type="checkbox"/> NINE <input type="checkbox"/> _____	<p>10. END OF FILE MARK <input checked="" type="checkbox"/> OCTAL 17  <input type="checkbox"/> _____</p>
<p>7. PARITY</p> <input type="checkbox"/> ODD <input checked="" type="checkbox"/> EVEN	<p>11. PASTE-ON-PAPER LABEL DESCRIPTION (INCLUDE ORIGINATOR NAME AND SOME LAY SPECIFICATIONS OF DATA TYPE, VOLUME NUMBER)</p> <p>138-015 NOAA/PMEL Laird, N.P.  File 1 ID = 61 8/16 - 11/21/74   File 6 ID = 62-F  File 2 ID = 61B 3/10 - 5/17/76   11/20/75 - 3/5/76  File 3 ID = 64 4/28 - 6/11/76   File 7 ID = 62-G  File 4 ID = 69 3/2 - 5/17/76   3/5 - 5/16/76  File 5 ID = 62-E 9/19 - 11/20/75   7-track, BCD, 800BPI, even parity</p>
<p>8. DENSITY</p> <input type="checkbox"/> 200 BPI <input type="checkbox"/> 1600 BPI <input type="checkbox"/> 556 BPI <input checked="" type="checkbox"/> 800 BPI <input type="checkbox"/> _____	<p>12. PHYSICAL BLOCK LENGTH IN BYTES 3600 bytes</p> <p>13. LENGTH OF BYTES IN BITS 6 bits</p>

FILE 6 9472 = VOL = SER  
LABEL = (1, NL)

COMPLETE THIS SECTION FOR PUNCHED CARDS OR TAPE, MAGNETIC TAPE, OR DISC SUBMISSIONS.

1. LIST RECORD TYPES CONTAINED IN THE TRANSMITTAL OF YOUR FILE  
GIVE METHOD OF IDENTIFYING EACH RECORD TYPE

2. GIVE BRIEF DESCRIPTION OF FILE ORGANIZATION

3. ATTRIBUTES AS EXPRESSED IN  PL-1  ALGOL  COBOL  
 FORTRAN  \_\_\_\_\_ LANGUAGE

4. RESPONSIBLE COMPUTER SPECIALIST:

NAME AND PHONE NUMBER P. TOPOLY 4-7505  
ADDRESS D.S.F. + J BRANCH

COMPLETE THIS SECTION IF DATA ARE ON MAGNETIC TAPE

<p>5. RECORDING MODE</p> <p><input type="checkbox"/> BCD    <input type="checkbox"/> BINARY</p> <p><input type="checkbox"/> ASCII    <input checked="" type="checkbox"/> EBCDIC</p> <p><input type="checkbox"/> _____</p>	<p>9. LENGTH OF INTER-RECORD GAP (IF KNOWN) <input checked="" type="checkbox"/> 3/4 INCH <input type="checkbox"/> _____</p>
<p>6. NUMBER OF TRACKS (CHANNELS)</p> <p><input type="checkbox"/> SEVEN</p> <p><input checked="" type="checkbox"/> NINE</p> <p><input type="checkbox"/> _____</p>	<p>10. END OF FILE MARK <input checked="" type="checkbox"/> OCTAL 17 <input type="checkbox"/> _____</p>
<p>7. PARITY</p> <p><input type="checkbox"/> ODD</p> <p><input type="checkbox"/> EVEN</p>	<p>11. PASTE-ON-PAPER LABEL DESCRIPTION (INCLUDE ORIGINATOR NAME AND SOME KEY SPECIFICATIONS OF DATA TYPE, VOLUME NUMBER)</p> <p><u>VOL: SER: 011872</u></p> <p><u>LABEL: (1, NL)</u></p> <p><u>LRECL: +20060</u></p>
<p>8. DENSITY:</p> <p><input type="checkbox"/> 200 BPI    <input checked="" type="checkbox"/> 1600 BPI</p> <p><input type="checkbox"/> 556 BPI</p> <p><input type="checkbox"/> 800 BPI</p> <p><input type="checkbox"/> _____</p>	<p>12. PHYSICAL BLOCK LENGTH IN BYTES</p> <p><u>4800</u></p> <p>13. LENGTH OF BYTES IN BITS</p>

### D. INSTRUMENT CALIBRATION

This calibration information will be utilized by NOAA's National Oceanographic Instrumentation Center in their efforts to develop calibration standards for voluntary acceptance by the oceanographic community. Identify the instruments used by your organization to obtain the scientific content of the DDF (i.e., STD, temperature and pressure sensors, salinometers, oxygen meters, velocimeters, etc.) and furnish the calibration data requested by completing and/or checking ("✓") the appropriate spaces. Add the interval time (i.e., 3 months, 6 months, 9 months, etc.) if the fixed interval calibration cycle is checked.

INSTRUMENT TYPE (MFR., MODEL NO.)	DATE OF LAST CALIBRATION	INSTRUMENT WAS CALIBRATED BY		CHECK ONE: INSTRUMENT IS CALIBRATED					INSTRUMENT IS NOT CALI- BRATED (✓)	
		YOUR ORGANIZATION (✓)	OTHER ORGANIZATION (GIVE NAME)	AT FIXED INTERVALS (✓)	BEFORE OR AFTER USE (✓)	BEFORE AND AFTER USE (✓)	ONLY AFTER REPAIR (✓)	ONLY WHEN NEW (✓)		
Aanderaa Current Meter RCM-4				<input checked="" type="checkbox"/>						
" same meter	1973		NOIC			1 yr.				

DATA DOCUMENTATION FORM

~~TR-0140~~

NOAA FORM 24-13  
(4-72)

U.S. DEPARTMENT OF COMMERCE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION  
NATIONAL OCEANOGRAPHIC DATA CENTER  
RECORDS SECTION  
ROCKVILLE, MARYLAND 20852

FORM APPROVED  
O.M.B. No. 41-R2651

TT1333 - TT1336

This form should accompany all data submissions to NODC. Section A, Originator Identification, must be completed when the data are submitted. It is highly desirable for NODC to also receive the remaining pertinent information at that time. This may be most easily accomplished by attaching reports, publications, or manuscripts which are readily available describing data collection, analysis, and format specifics. Readable, handwritten submissions are acceptable in all cases. All data shipments should be sent to the above address.

A. ORIGINATOR IDENTIFICATION

THIS SECTION MUST BE COMPLETED BY DONOR FOR ALL DATA TRANSMITTALS

1. NAME AND ADDRESS OF INSTITUTION, LABORATORY, OR ACTIVITY WITH WHICH SUBMITTED DATA ARE ASSOCIATED			
PMEL/NOAA 3711 15th NE Seattle, Washington 98105			
2. EXPEDITION, PROJECT, OR PROGRAM DURING WHICH DATA WERE COLLECTED		3. CRUISE NUMBER(S) USED BY ORIGINATOR TO IDENTIFY DATA IN THIS SHIPMENT	
OCSEAP - Gulf of Alaska		File ID = 61B	
4. PLATFORM NAME(S)	5. PLATFORM TYPE(S) (E.G., SHIP, BUOY, ETC.)	6. PLATFORM AND OPERATOR NATIONALITY(IES)	7. DATES
61B	Buoy	U.S.	U.S.
		PLATFORM	OPERATOR
		U.S.	U.S.
		FROM: MO, DAY, YR	TO: MO, DAY, YR
		3/10/76	5/17/76
8. ARE DATA PROPRIETARY?		11. PLEASE DARKEN ALL MARSDEN SQUARES IN WHICH ANY DATA CONTAINED IN YOUR SUBMISSION WERE COLLECTED.	
<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES  IF YES, WHEN CAN THEY BE RELEASED FOR GENERAL USE? YEAR _____ MONTH _____		GENERAL AREA 	
9. ARE DATA DECLARED NATIONAL PROGRAM (DNP)? (I.E., SHOULD THEY BE INCLUDED IN WORLD DATA CENTERS HOLDINGS FOR INTERNATIONAL EXCHANGE?)			
<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> PART (SPECIFY BELOW)			
10. PERSON TO WHOM INQUIRIES CONCERNING DATA SHOULD BE ADDRESSED WITH TELEPHONE NUMBER (AND ADDRESS IF OTHER THAN IN ITEM-1)			
Mr. Pat Laird (206) 442-4580			

DATA DOCUMENTATION FORM

~~TR 0141~~

NOAA FORM 24-13 (4-72)

U.S. DEPARTMENT OF COMMERCE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION  
NATIONAL OCEANOGRAPHIC DATA CENTER  
RECORDS SECTION  
ROCKVILLE, MARYLAND 20852

FORM APPROVED  
O.M.B. No. 41-R2551

TT1337 - ~~TT1338~~  
TT1340

This form should accompany all data submissions to NODC. Section A, Originator Identification, must be completed when the data are submitted. It is highly desirable for NODC to also receive the remaining pertinent information at that time. This may be most easily accomplished by attaching reports, publications, or manuscripts which are readily available describing data collection, analysis, and format specifics. Readable, handwritten submissions are acceptable in all cases. All data shipments should be sent to the above address.

A. ORIGINATOR IDENTIFICATION

THIS SECTION MUST BE COMPLETED BY DONOR FOR ALL DATA TRANSMITTALS

1. NAME AND ADDRESS OF INSTITUTION, LABORATORY, OR ACTIVITY WITH WHICH SUBMITTED DATA ARE ASSOCIATED			
PMEL/NOAA 3711 15th NE Seattle, Washington 98105			
2. EXPEDITION, PROJECT, OR PROGRAM DURING WHICH DATA WERE COLLECTED		3. CRUISE NUMBER(S) USED BY ORIGINATOR TO IDENTIFY DATA IN THIS SHIPMENT	
OCSEAP - Gulf of Alaska		File ID = 64	
4. PLATFORM NAME(S)	5. PLATFORM TYPE(S) (E.G., SHIP, BUOY, ETC.)	6. PLATFORM AND OPERATOR NATIONALITY(IES)	7. DATES
64	Buoy	U.S. U.S.	FROM: MO/DAY/YR TO: MO/DAY/YR 4/28/76 6/11/76
8. ARE DATA PROPRIETARY? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES IF YES, WHEN CAN THEY BE RELEASED FOR GENERAL USE? YEAR _____ MONTH _____		11. PLEASE DARKEN ALL MARSDEN SQUARES IN WHICH ANY DATA CONTAINED IN YOUR SUBMISSION WERE COLLECTED.	
9. ARE DATA DECLARED NATIONAL PROGRAM (DNP)? (I.E., SHOULD THEY BE INCLUDED IN WORLD DATA CENTERS HOLDINGS FOR INTERNATIONAL EXCHANGE?) <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> PART (SPECIFY BELOW)		GENERAL AREA	
10. PERSON TO WHOM INQUIRIES CONCERNING DATA SHOULD BE ADDRESSED WITH TELEPHONE NUMBER (AND ADDRESS IF OTHER THAN IN ITEM-1)  Mr. Pat Laird (206) 442-4580			

DATA DOCUMENTATION FORM

~~FR-012~~

NOAA FORM 24-13  
(4-72)

U.S. DEPARTMENT OF COMMERCE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION  
NATIONAL OCEANOGRAPHIC DATA CENTER  
RECORDS SECTION  
ROCKVILLE, MARYLAND 20852

FORM APPROVED  
O.M.B. No. 41-R2651

TT 1341 - TT 1342

This form should accompany all data submissions to NODC. Section A, Originator Identification, must be completed when the data are submitted. It is highly desirable for NODC to also receive the remaining pertinent information at that time. This may be most easily accomplished by attaching reports, publications, or manuscripts which are readily available describing data collection, analysis, and format specifics. Readable, handwritten submissions are acceptable in all cases. All data shipments should be sent to the above address.

A. ORIGINATOR IDENTIFICATION

THIS SECTION MUST BE COMPLETED BY DONOR FOR ALL DATA TRANSMITTALS

1. NAME AND ADDRESS OF INSTITUTION, LABORATORY, OR ACTIVITY WITH WHICH SUBMITTED DATA ARE ASSOCIATED			
PMEL/NOAA 3711 15th NE Seattle, Washington 98105			
2. EXPEDITION, PROJECT, OR PROGRAM DURING WHICH DATA WERE COLLECTED		3. CRUISE NUMBER(S) USED BY ORIGINATOR TO IDENTIFY DATA IN THIS SHIPMENT	
OCSEAP - Gulf of Alaska		File ID = 69	
4. PLATFORM NAME(S)	5. PLATFORM TYPE(S) (E.G., SHIP, BUOY, ETC.)	6. PLATFORM AND OPERATOR NATIONALITY(IES)	7. DATES
69	Buoy	U.S. U.S.	FROM: MO/DAY/YR TO: MO/DAY/YR
			3/3/76 5/17/76
8. ARE DATA PROPRIETARY? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES  IF YES, WHEN CAN THEY BE RELEASED FOR GENERAL USE? YEAR _____ MONTH _____		11. PLEASE DARKEN ALL MARSDEN SQUARES IN WHICH ANY DATA CONTAINED IN YOUR SUBMISSION WERE COLLECTED.	
9. ARE DATA DECLARED NATIONAL PROGRAM (DNP)? (I.E., SHOULD THEY BE INCLUDED IN WORLD DATA CENTERS HOLDINGS FOR INTERNATIONAL EXCHANGE?) <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> PART (SPECIFY BELOW)		GENERAL AREA 	
10. PERSON TO WHOM INQUIRIES CONCERNING DATA SHOULD BE ADDRESSED WITH TELEPHONE NUMBER (AND ADDRESS IF OTHER THAN IN ITEM-1)			
Mr. Pat Laird (206) 442-4580			



DATA DOCUMENTATION FORM

TR-0143

NOAA FORM 24-13 (4-72)

U.S. DEPARTMENT OF COMMERCE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION  
NATIONAL OCEANOGRAPHIC DATA CENTER  
RECORDS SECTION  
ROCKVILLE, MARYLAND 20852

FORM APPROVED  
O.M.B. No. 41-R2651

TT1343 - TT1346

This form should accompany all data submissions to NODC. Section A, Originator Identification, must be completed when the data are submitted. It is highly desirable for NODC to also receive the remaining pertinent information at that time. This may be most easily accomplished by attaching reports, publications, or manuscripts which are readily available describing data collection, analysis, and format specifics. Readable, handwritten submissions are acceptable in all cases. All data shipments should be sent to the above address.

A. ORIGINATOR IDENTIFICATION

THIS SECTION MUST BE COMPLETED BY DONOR FOR ALL DATA TRANSMITTALS

1. NAME AND ADDRESS OF INSTITUTION, LABORATORY, OR ACTIVITY WITH WHICH SUBMITTED DATA ARE ASSOCIATED			
PMEL/NOAA 3711 15th NE Seattle, Washington 98105			
2. EXPEDITION, PROJECT, OR PROGRAM DURING WHICH DATA WERE COLLECTED		3. CRUISE NUMBER(S) USED BY ORIGINATOR TO IDENTIFY DATA IN THIS SHIPMENT	
OCSEAP - Gulf of Alaska		File ID = 62-E	
4. PLATFORM NAME(S)	5. PLATFORM TYPE(S) (E.G., SHIP, BUOY, ETC.)	6. PLATFORM AND OPERATOR NATIONALITY(IES)	7. DATES
62E	BUOY	U.S. U.S.	FROM: MO/PAY/YR TO: MO/DAY/YR 9/19/75 11/20/75
8. ARE DATA PROPRIETARY? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES  IF YES, WHEN CAN THEY BE RELEASED FOR GENERAL USE? YEAR _____ MONTH _____		11. PLEASE DARKEN ALL MARSDEN SQUARES IN WHICH ANY DATA CONTAINED IN YOUR SUBMISSION WERE COLLECTED.	
9. ARE DATA DECLARED NATIONAL PROGRAM (DNP)? (I.E., SHOULD THEY BE INCLUDED IN WORLD DATA CENTERS HOLDINGS FOR INTERNATIONAL EXCHANGE?) <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> PART (SPECIFY BELOW)		GENERAL AREA	
10. PERSON TO WHOM INQUIRIES CONCERNING DATA SHOULD BE ADDRESSED WITH TELEPHONE NUMBER (AND ADDRESS IF OTHER THAN IN ITEM-1)  Mr. Pat Laird (206) 442-4580  8-399-7450			

~~TR-0144~~

DATA DOCUMENTATION FORM

NOAA FORM 24-13  
(7-72)

U.S. DEPARTMENT OF COMMERCE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION  
NATIONAL OCEANOGRAPHIC DATA CENTER  
RECORDS SECTION  
ROCKVILLE, MARYLAND 20852

FORM APPROVED  
O.M.B. No. 41-R2651

TT1347 - TT1349

This form should accompany all data submissions to NODC. Section A, Originator Identification, must be completed when the data are submitted. It is highly desirable for NODC to also receive the remaining pertinent information at that time. This may be most easily accomplished by attaching reports, publications, or manuscripts which are readily available describing data collection, analysis, and format specifics. Readable, handwritten submissions are acceptable in all cases. All data shipments should be sent to the above address.

A. ORIGINATOR IDENTIFICATION

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1. NAME AND ADDRESS OF INSTITUTION, LABORATORY, OR ACTIVITY WITH WHICH SUBMITTED DATA ARE ASSOCIATED			
PMEL/NOAA 3711 15th NE Seattle, Washington 98105			
2. EXPEDITION, PROJECT, OR PROGRAM DURING WHICH DATA WERE COLLECTED		3. CRUISE NUMBER(S) USED BY ORIGINATOR TO IDENTIFY DATA IN THIS SHIPMENT	
OCSEAP - Gulf of Alaska		File ID = 62-F	
4. PLATFORM NAME(S)	5. PLATFORM TYPE(S) (E.G., SHIP, BUOY, ETC.)	6. PLATFORM AND OPERATOR NATIONALITY(IES)	7. DATES
62F	Buoy	U.S. U.S.	FROM: 11/20/75 TO: 3/5/76
8. ARE DATA PROPRIETARY? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES  IF YES, WHEN CAN THEY BE RELEASED FOR GENERAL USE? YEAR _____ MONTH _____		11. PLEASE DARKEN ALL MARSDEN SQUARES IN WHICH ANY DATA CONTAINED IN YOUR SUBMISSION WERE COLLECTED.	
9. ARE DATA DECLARED NATIONAL PROGRAM (DNP)? (I.E., SHOULD THEY BE INCLUDED IN WORLD DATA CENTERS HOLDINGS FOR INTERNATIONAL EXCHANGE?) <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> PART (SPECIFY BELOW)		GENERAL AREA	
10. PERSON TO WHOM INQUIRIES CONCERNING DATA SHOULD BE ADDRESSED WITH TELEPHONE NUMBER (AND ADDRESS IF OTHER THAN IN ITEM-1)  Mr. Pat Laird (206) 442-4580			

DATA DOCUMENTATION FORM

TR-0145

NOAA FORM 24-13  
14-721

U.S. DEPARTMENT OF COMMERCE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION  
NATIONAL OCEANOGRAPHIC DATA CENTER  
RECORDS SECTION  
ROCKVILLE, MARYLAND 20852

FORM APPROVED  
O.M.B. No. 41-R2651

TT 1350 - TT 1352

This form should accompany all data submissions to NODC. Section A, Originator Identification, must be completed when the data are submitted. It is highly desirable for NODC to also receive the remaining pertinent information at that time. This may be most easily accomplished by attaching reports, publications, or manuscripts which are readily available describing data collection, analysis, and format specifics. Readable, handwritten submissions are acceptable in all cases. All data shipments should be sent to the above address.

A. ORIGINATOR IDENTIFICATION

THIS SECTION MUST BE COMPLETED BY DONOR FOR ALL DATA TRANSMITTALS

1. NAME AND ADDRESS OF INSTITUTION, LABORATORY, OR ACTIVITY WITH WHICH SUBMITTED DATA ARE ASSOCIATED			
PMEL/NOAA 3711 15th NE Seattle, Washington 98105			
2. EXPEDITION, PROJECT, OR PROGRAM DURING WHICH DATA WERE COLLECTED		3. CRUISE NUMBER(S) USED BY ORIGINATOR TO IDENTIFY DATA IN THIS SHIPMENT	
DCSEAP - Gulf of Alaska		File ID = 62-9	
4. PLATFORM NAME(S)	5. PLATFORM TYPE(S) (E.G., SHIP, BUOY, ETC.)	6. PLATFORM AND OPERATOR NATIONALITY(IES)	7. DATES
62 G	Buoy	U.S. U.S.	FROM: MO/DAY/YR TO: MO/DAY/YR
			3/5/76 5/16/76
8. ARE DATA PROPRIETARY? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES  IF YES, WHEN CAN THEY BE RELEASED FOR GENERAL USE? YEAR _____ MONTH _____		11. PLEASE DARKEN ALL MARSDEN SQUARES IN WHICH ANY DATA CONTAINED IN YOUR SUBMISSION WERE COLLECTED.	
		GENERAL AREA	
9. ARE DATA DECLARED NATIONAL PROGRAM (DNP)? (I.E., SHOULD THEY BE INCLUDED IN WORLD DATA CENTERS HOLDINGS FOR INTERNATIONAL EXCHANGE?) <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> PART (SPECIFY BELOW)			
10. PERSON TO WHOM INQUIRIES CONCERNING DATA SHOULD BE ADDRESSED WITH TELEPHONE NUMBER (AND ADDRESS IF OTHER THAN IN ITEM-1)			
Mr. Pat Laird (206) 442-4580			