

023
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03-07-94

DATA ENTRY INFORMATION SYSTEM
(DATA SET INVENTORY)

DATE OF ENTRY:

081732

9400030

REFERENCE NUMBER:

ACCESSION NUMBER:

FORMER REFERENCE NUMBER:

FORMER ACCESSION NUMBER:

(RESUB)

INVENTORY

MEDIA-IN:

04 - STRIPCHART Non-Supplean

DINDB CODE

17

EXCHANGE (FORMAT):

E005

UBT (EXP)

PROCESSING (FORMAT):

E116

XBT

(NOTE) If data is F022, create an additional record for C001.

INSTITUTE (COUNTRY AND INSTITUTE CODES):

3105

PLATFORM (COUNTRY AND PLATFORM CODES):

PLATFORM TYPE:

9

SHIP

DINDB CODE

09

ORIGINATORS FILE ID:

ORIGINATORS CRUISE ID:

5061025

CRUISE START DATE:

02/11/94

CRUISE END DATE:

02/18/94

Prus

PROJECT CODE:

DATA USE CODE (DUC):

3

to col

VOLUME - NUMBER OF STATIONS:

12

NUMBER OF RECORDS:

12

If STA/REC counts are not appropriate then enter -

NUMBER:

UNITS:

OCEAN AREA

CODE 1:

57A

MEANING:

NW PACIFIC OCEAN

CODE 2:

MEANING:

CODE 3:

MEANING:

DINDB TRACK TRANSACTION GENERATED:

1 1

023 ✓
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03-07-94 ✓

9400030 ✓
~~03-07-94~~

DATA ENTRY INFORMATION SYSTEM
(SUBMISSIONS)

DATE OF ENTRY: ~~03-07-94~~ ACCESSION NUMBER: ~~03-07-94~~
DATE OF RECEIPT: ~~03-07-94~~ FORMER ACCESSION NUMBER: ~~03-07-94~~ (RESUBS UNL)

SUBMITTER'S NAME: USS LEWIS B. POLLEN (FFG-23) (FIRST M.I. LAST)
SUBMITTER'S ADDRESS: COMM. OFF.
ADDRESS: FPD
CITY: SAN FRANCISCO STATE: CA ZIP: 94675-1479
COUNTRY: _____

NODC SUBMITTER CODE: NONE SUBMISSION PRIORITY: NONE
L.O. AREA: SW S.A. CODE: _____ SPONSORING AGENCY: _____

CONTENTS OF SUBMISSION

DOCUMENTATION? _____ MAGNETIC TAPE(S)? _____ DISKETTE(S)? _____
STRIP CHART(S)? ✓ LOG SHEET(S)? ✓ MAP(S)/CHART(S)? _____
PUBLICATION(S)? _____ MICROFORM(S)? _____ CASSETTE(S)? _____
DESCRIPTION: 12-XBT STRIPCHARTS + LOGS(4): 02/01-02/18/94
(to be entered on Submitter acknowledgement letter)

Press
PgDn
cont 1

SUBMISSION MANAGER (3 INITIALS): DLB
DATE TRANSFERRED TO SUBMISSION MANAGER: ~~03-07-94~~

SUBMITTER ACKNOWLEDGEMENT DATE: / /

ENTIRE SUBMISSION ON "HOLD" STATUS

WHEN: / / WHY: _____ WHO'S RESPONSIBLE: _____ RESTART DATE: / /
REASON: _____
WHEN: / / WHY: _____ WHO'S RESPONSIBLE: _____ RESTART DATE: / /
REASON: _____
SUBMITTER CONTACTED ON: / /

ENTIRE SUBMISSION CANCELLED

WHEN: / / DISPOSITION: _____
REASON: _____