

MercNet Data Request Form

Date of request: _____

Submitted to (name of person at BRI or EPA): _____

Person requesting data:

Name _____

Affiliation _____

Street address _____ City _____

State/province _____ Zip code _____ Telephone _____

Fax number _____ E-mail address _____

Title or name of dataset of interest (please use name of dataset as listed in the MercNet monitoring inventory at <http://www.briloon.org/science-and-conservation/centers/mercury-toxin.php>):

What organization(s) produced this data? _____

Name of institutional contact person for the data set: _____

Purpose for request: _____

Have you already contacted the data originator, or someone at the institution of origin, regarding this request?

Deadline for response, if applicable: _____

Requests may be submitted to:
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