



### TABULAR Application

**Data Request #: 881**  
**TABULAR REQUEST**

**Request Date:** 03/29/2016

Principal Investigator	Primary Contact
<b>Name:</b> Cindy Requestor MGR 123 MAIN STREET SUITE 202 MIAMI LAKES, FL 33016  <b>Cred:</b> BS <b>email:</b> stuff@stuff.stuf <b>Phone:</b> (305)623-0360 <b>Fax:</b> ()- <b>Bus:</b> ACME CORP ACADEMIC	<b>Name:</b> Cindy Requestor MGR 123 MAIN STREET SUITE 202 MIAMI LAKES, FL 33016  <b>Cred:</b> BS <b>email:</b> stuff@stuff.stuf <b>Phone:</b> (305)623-0360 <b>Fax:</b> ()- <b>Bus:</b> ACME CORP ACADEMIC

**Intent to Publish:** Yes

**Purpose of Request:** GRANT

**Project Status:**



Florida Statewide Cancer Registry



Florida Cancer Data System

---

**Abstract of Study Protocol or Project Activities:**

---

Enter the specifics on the data requested here.

---

**How will this FCDS data be used and presented:**

---

Enter how the FCDS data will be used and presented here.