

PUBLIC MEETING ANNOUNCEMENT DATA INPUT

NEW

REVISED

(Fields with shaded headings are mandatory)

NRC MEETING CONTACT

| NAME | COMMERCIAL TELEPHONE <i>(Include Area Code)</i> | FACSIMILE TELEPHONE <i>(Include Area Code)</i> |
|-----------------|--|---|
| William R. Ward | (301) 415 - 7038 | (301) 415 - 5369 |

MEETING DATE(S) AND TIME(S) (up to three entries)

| MEETING DATE(S) <i>(Use MM/DD/YY format)</i> | | MEETING TIME(S) <i>(Circle a.m. or p.m.)</i> | | | |
|--|---------|--|--|---|-------------------------------|
| FROM | TO | BEGINNING | ENDING | | |
| 8/30/00 | 8/30/00 | 9:00 | <input checked="" type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. |
| | | | <input type="checkbox"/> p.m. | <input checked="" type="checkbox"/> 11:00 | <input type="checkbox"/> p.m. |
| | | | <input type="checkbox"/> a.m. | | <input type="checkbox"/> a.m. |
| | | | <input type="checkbox"/> p.m. | | <input type="checkbox"/> p.m. |
| | | | <input type="checkbox"/> a.m. | | <input type="checkbox"/> a.m. |
| | | | <input type="checkbox"/> p.m. | | <input type="checkbox"/> p.m. |

MEETING LOCATION

| BUILDING | STREET ADDRESS |
|-----------------|----------------------|
| Two White Flint | 11545 Rockville Pike |
| ROOM NUMBER | CITY AND STATE |
| 8-F1 | Rockville, MD |

PURPOSE OF MEETING (96 characters available)

To discuss MEPROLIGHT Sealed Source/Device applications currently under review by NRC/NMSS/MSIB.

COMMENTS (96 characters available)

Scopus Light USA to join HESCO Inc. as a US distributor of MEPROLIGHT products.

**MEETING
(CHECK ONE)**

- PUBLIC
 NON-PUBLIC

DOCKET OR PROJECT NUMBER and/or

FACILITY NAME

| | |
|----------------|--|
| NR-352-D-101-E | Gun sights (HESCO registration - Scopus Light USA registration would be similar) |
| NR-352-D-102-E | Watches and Altimeters (HESCO registration - Scopus Light USA registration would be similar) |
| NR-352-D-103-E | Personal markers (HESCO registration - Scopus Light USA registration would be similar) |

ORGANIZATIONS IN ATTENDANCE

| NRC OFFICES/REGIONS <i>(Offices only -- DO NOT use Divisions, Branches, etc.)</i> | OUTSIDE PARTICIPANTS <i>(Company/Licensee/Agency Names -- avoid abbreviations)</i> |
|--|---|
| NRC/NMSS | MEPROLIGHT/SCOPUS LIGHT USA |

APPROVAL -- (Required for fewer than 10 calendar days advance notice)

SIGNATURE -- BRANCH CHIEF

DATE

RETURN THIS FORM TO:

MEETING NOTICE COORDINATOR, MAIL STOP T-6 D8
FACSIMILE (301) 415-5130, TELEPHONE (301) 415-7092, E-MAIL: PMNS