

CONTROL NUMBER	DATE RECEIVED	TECH. REVIEWER	EXPIRATION DATE	REFERENCE NUMBER	LICENSE NUMBER	AMENDMENT NO.
6281	JUL 5 1957	<del>W. J. B.</del>	7/31/59			

ISOTOPE	FORM	POSSESSION LIMIT	USE
As Any byproduct material between atomic nos. 3-83 inclusive	<del>any</del> any except where specified in item 8.	100 mc of any byproduct material between atomic nos. 3-83, incl. except: 30 curies of <sup>238</sup> U as sealed sources of 20, 50 and 500 curies 110 curies of Co 60 as 2 sealed sources of 10 and 100 curies. <del>10 curies</del> 10 curies of <sup>192</sup> Ir as sealed source.	50 110 100 All duplicate flow sheet

INSTRUMENTATION	SCHA REVIEW		LETTERS-PHONE CALLS-VISITS	CONDITIONS		APPROVE	CANCEL
	yes	no		1. A B C	9.	REVIEWER	DATE
INSPECT. REPORT	Quimby	yes no		2. A B C	10. A B		
USERS EXPERIENCE	Brown	yes no		3.	11.		
313a	Childs	yes no		4. A B	12.		
U. S. CATALOGUE	Cooper	yes no		5. A B C	13. A B	CHIEF	DATE
				6.	14.		
				7. A B C	15. A B C		
				8. A B	16. A B		

① did not sign  
 ② no text  
 ③

6-3

W 281 62 17

Date Received JUL 5 '57 No. Copies \_\_\_\_\_ Application No. 37-2416-2

Company Confidential \_\_\_\_\_ Expiration Date 7/31/59 Reference No. \_\_\_\_\_

Isotope	Form	Possession Limit M.C.
Any product steril tissue misc. nos. 83, incl. Pr. 210.	any, except where otherwise specified in applic. dated 7/15/57	A. any by agreement between atomic nos. 3-83, incl. total 170C B. 30C

Use:  
A+B Research + develop - - as defined  
- - -  
sept 190C Colo; 10C IR192

Service Irradiation  
\* any product, irradiated  
\* source or sealed nuclear material  
U-235 U-238  
C. J. Roberts, chairman

\*\*  
C. In accordance with AEC criteria AT (30-3)-220.  
Produced by 20 grams of Uranium

Special Conditions: (Circle)  
 A B C  (10) A B C  
 D  (11)  
 12.  
 13.  
 A B C 14.  
 15.  
 (16) A + B  
 17. A B  
 See reverse side

Comments: APPROVED JUL 18 1957  
 Letters: 7/10/57 separated 37-2416-1 pls return copies. Thanks for consid. or visit. Wom

New Application	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	SCHA Review	<input type="checkbox"/> Yes <input type="checkbox"/> No	Childs
13A Reviewed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Items Reproduced:		Quimby
13B Reviewed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Brown
receptor Statement	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Reviewer	Date	Action
Instrumentation Checked	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Wom	7/10/57	Approve
Telephone Call	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Disapprove
SB Files Checked	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Cancelled
SB Review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Revised

Wom