

*E.S.C. Resources, Inc.*

Thickness Gauges and Coating Weight Gauges

28 River Bend Rd. - Montgomery, IL 60538 - 630-800-3500 - FAX 630-264-2846

Usnrc dc-01

January 13, 2010

RADIOACTIVE MATERIAL LICENSE  
IL-01283-01

USNRC  
Ms. Janice Owens 301-415-3684  
Office of International Programs  
Washington, DC 20555  
Fax 301-415-2395  
2 pages total

Dear Ms. Owens:

We shipped one source overseas in 2009.

See attached.

If you have any questions, please contact me at 630-264-2843

Yours Truly,



Bart Moscarello  
President/RSO

*ANN: Nicolo*

NRC FORM 653  
(11-2000)  
10 CFR 32

U.S. NUCLEAR REGULATORY COMMISSION

APPROVED BY OMB: NO. 3150-0001

EXPIRES: 08/31/2002

**TRANSFERS OF INDUSTRIAL DEVICES REPORT**

(Continue on NRC Form 653A or NRC Form 653B, as appropriate)

Estimated burden per response to comply with this mandatory collection request: 24 minutes. NRC requests quarterly reports to keep apprised of device movements. Send comments regarding burden estimate to the Records Management Branch (T-6 E6), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to bjs1@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0001), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

NAME OF VENDOR <i>ESC Resources</i>		REPORTING PERIOD	
LICENSE NUMBER <i>FL-01783-01</i>		FROM <i>10-1-09</i>	TO <i>12-31-09</i>

For each "person" to whom a device(s) has been transferred during the reporting period, supply the following:

INTERMEDIATE PERSON (if any)

NAME OF INTERMEDIATE PERSON	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
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GENERAL LICENSEE USER INFORMATION

NAME OF GENERAL LICENSEE USER <i>Serviacero Worthington</i>	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code) <i>Arco Vial, Libramiento N Km 21.5 Col. Ejido, San Miguel de las Garzas Escobedo, N.L. Mexico 66350</i>	
DEPARTMENT <i>SLiming</i>		
NAME OF RESPONSIBLE INDIVIDUAL <i>Humberto Castellanos</i>		TELEPHONE <i>81 8253-2545</i>
TITLE OF RESPONSIBLE INDIVIDUAL <i>Plant Manager</i>		

INFORMATION ON DEVICE(S) TRANSFERRED

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS
<i>11/11/9</i>	<i>(D) Gamma-Gaudo</i>	<i>SH-6000</i>	<i>3033AR</i>	<i>Am-241</i>	<i>1000 mCi</i>

INTERMEDIATE PERSON (if any)

NAME OF INTERMEDIATE PERSON	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
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GENERAL LICENSEE USER INFORMATION

NAME OF GENERAL LICENSEE USER	MAILING ADDRESS AT THE LOCATION OF USE (No.. P.O. Boxes, include Zip Code)	
DEPARTMENT		
NAME OF RESPONSIBLE INDIVIDUAL		TELEPHONE
TITLE OF RESPONSIBLE INDIVIDUAL		

INFORMATION ON DEVICE(S) TRANSFERRED

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS