



CONVERSATION RECORD

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU Valeriia Starovoitova	DATE OF CONTACT 03/18/2015	TYPE OF CONVERSATION <input type="checkbox"/> E-MAIL <input type="checkbox"/> INCOMING <input checked="" type="checkbox"/> TELEPHONE <input type="checkbox"/> OUTGOING
E-MAIL ADDRESS valeriia@niowaveinc.com	TELEPHONE NUMBER (517) 999-3475	
ORGANIZATION Niowave, Inc.	DOCKET NUMBER(S) 030-38770	
LICENSE NUMBER(S) 21-35144-02	CONTROL NUMBER(S) 584728	

SUBJECT
Inventory control of licensed material

SUMMARY AND ACTION REQUIRED (IF ANY)

In order to assure that you do not exceed possession limits authorized on your license, please provide a letter that commits to conducting a physical inventory every 6 months to account for all licensed material received and possessed under the license, and maintaining records of each physical inventory.

NAME OF PERSON DOCUMENTING CONVERSATION
Kevin Null

SIGNATURE 	DATE OF SIGNATURE 3/18/15
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