



GL-705348-20

11/03/2015

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

Our records indicate that you have these devices. Please update the information as necessary.

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NRC Device Key 432040 (Internal Control Number)

Distributor/Distributed By: Gamma Instruments, Inc.

[Empty grid for distributor information]

Distributor License Number: 3963-30 GL

[Empty grid for distributor license number]

Manufacturer Name: GAMMA INSTRUMENTS, INC.

[Empty grid for manufacturer name]

Device Model (Not Source Model): GR-100

[Empty grid for device model]

Device Serial Number: 920602

[Empty grid for device serial number]

Transfer Date (Receipt Date): 08/15/1992

[Empty grid for transfer date]

MM DD YYYY

Not in possession of device (Also complete Section 4.)

| | Isotope (e.g. AM241) | Activity (e.g. 100) | Unit (e.g. mCi) |
|---|-----------------------|--------------------------------|---------------------|
| 1 | AM241 [Empty grid] | 1000.000000000 [Empty grid] | mCi [Empty grid] |
| 2 | [Empty grid] | [Empty grid] | [Empty grid] |
| 3 | [Empty grid] | [Empty grid] | [Empty grid] |
| 4 | [Empty grid] | [Empty grid] | [Empty grid] |
| 5 | [Empty grid] | [Empty grid] | [Empty grid] |
| 6 | [Empty grid] | [Empty grid] | [Empty grid] |





SECTION 4 - NOT IN POSSESSION OF DEVICE

Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Part 1

Transfer Date:

NRC Device Key:

(from Section 2 or 6)

MM DD YYYY

Location of the Device:

- Whereabouts Unknown (complete Part 1 only)
- Transferred to another general licensee (complete Parts 2 and 3)
- Never Possessed the Device (complete Part 1 only)
- Transferred to a Specific Licensee (Not the manufacturer) (complete Part 2)
- Returned to Manufacturer (complete Part 1 only)

Part 2 License Number of Recipient (if transferred to a specific licensee):

Company Name:

Department:

Address Line 1:

Address Line 2:

City:

State:

Zip Code:

-

Part 3

Enter the name of the individual responsible for this device:

Last Name:

First Name:

Middle Initial:

Telephone Number:

Extension:

Title:





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SECTION 5 - CERTIFICATION

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I hereby certify that:

- A. All information contained in this registration is true and complete to the best of my knowledge and belief.
- B. A physical inventory of the devices subject to registration has been completed, and the device information on this form has been checked against the device labeling.
- C. I am aware of the requirements of the general license, provided in 10 CFR 31.5.

(Copies of applicable regulations may be viewed at the NRC website at:

<http://www.nrc.gov/reading-rm/doc-collections/cfr>)

Lucy M. Randall

6-9-16

SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

DATE

WARNING: FALSE STATEMENTS MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL ASPECTS. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY WRONG STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER IN ITS JURISDICTION.





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SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

SECTION 6

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| | | |
|------------------------|--------------------------|----------------|
| NRC Device Key: | Manufacturer License No: | |
| Manufacturer Name: | | |
| Model Number: | Serial #: | Transfer Date: |