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SECTION 1  
PAGE 2 of 2

**SECTION 1 - GENERAL LICENSEE INFORMATION (Continued)**

**Enter the name, telephone number and title of the person who is the responsible individual for the device(s).**

Last Name: RAY

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

First Name: JOHN

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Middle Initial: E

--

Business Telephone Number: (574) 848-5288

--	--	--	--	--	--	--	--

Extension:

--	--	--	--	--

Title: CURRENT SAFETY OFFICER

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Enter the mailing address where correspondence regarding your device(s) should be sent.**

Department: JOHN RAY

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Address Line 1: 1123 COMMERCE DRIVE

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Address Line 2:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

City: BRISTOL

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

State: IN

--	--

Zip Code: 46507

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**SECTION 2 - DEVICES SUBJECT TO REGISTRATION**

SECTION 2  
PAGE 1 of 1

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

**NRC Device Key**                      **541929 (Internal Control Number)**

Distributor/Distributed By:    Asoma Instruments, Inc.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Distributor License Number:    6-2788G

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Manufacturer name:            ASOMA INSTRUMENTS, INC.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Device Model (Not Source Model):    200

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Device Serial Number:        4621

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Transfer Date:    01/12/2004

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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

MM            DD            YYYY

	Isotope (e.g. AM241)	Activity (e.g. 1005)	Unit (e.g. mCi)																													
1	CM244 <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						30 <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																						mCi <table border="1"><tr><td></td><td></td><td></td></tr></table>			
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**SECTION 4 - NOT IN POSSESSION OF DEVICE**



**SECTION 4**

**PAGE 1 of 1**

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

**Part 1**

NRC Device Key:  
(from Section 2 or 6)

Transfer Date:

MM

DD

YYYY

Location of the Device:

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

**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:

Business Telephone  
Number:

Extension:

Title:





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**SECTION 5 - CERTIFICATION**

**SECTION 5**  
**PAGE 1 of 1**

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.

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

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

*John E. Ray*

*2/18/19*

**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. 10 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 - DEVICE NOT SUBJECT TO REGISTRATION**

**SECTION 6**  
**PAGE 1 of 1**

**NRC Device Key:** 541971                      **Manufacturer License No:** 6-2788G  
**Manufacturer Name:** ASOMA INSTRUMENTS, INC.  
**Model Number:** 200                      **Serial #:** 4621                      **Transfer Date:** 01/12/2004  
**Isotope:** FE55                      **Activity:** 20                      **Unit:** mCi

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**NRC Device Key:** 541989                      **Manufacturer License No:** 6-2788G  
**Manufacturer Name:** ASOMA INSTRUMENTS, INC.  
**Model Number:** 200                      **Serial #:** 4621                      **Transfer Date:** 01/12/2004  
**Isotope:** FE55                      **Activity:** 0.006                      **Unit:** mCi

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**NRC Device Key:** 646515                      **Manufacturer License No:** L02788G  
**Manufacturer Name:** SPECTRO  
**Model Number:** 200                      **Serial #:** 4621                      **Transfer Date:** 04/29/2002  
**Isotope:** FE55                      **Activity:** 20                      **Unit:** mCi

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