

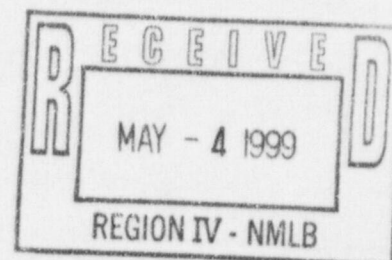
JL SHEPHERD & ASSOCIATES

1010 ARROYO AVE., SAN FERNANDO, CALIFORNIA 91340-1822

818-898-2361 FAX 818-361-8095

May 4, 1999

Ms. Christi Hernandez/
Ms. Billie Gruszynski
U.S. N. R. C. - Region IV
DNMS/NMLB - ATTN: RECIPROCITY
611 Ryan Plaza Drive, Ste 400
Arlington, TX 76011-8064



Fax No. (817) 860-8263 - Page 1 of 1

Ref.: Notification of Proposed Activities in Non-Agreement State,
State of California Lic. No. 1777-19, Amendment # 75/Timely Renewal

Dear Ms. Hernandez or Ms. Gruszynski:

Please be advised that we are conducting a service call at the below listed facility. Technician Tom Shepherd,
May 10th thru May 14th, 1999.

Location: Defense Microelectronics Activity (McClellan Air Force Base), 4235 Forcum Avenue, Bldg. 620,
Room 136, Sacramento, CA 95652. We shall perform preventative maintenance and calibration of the Model
484 (Model 81-22 Irradiator) S/N 7125 w/ 2/Ea 9,500Ci Cobalt-60 Sources, S/N JLS-12177-1 & JLS-12177-2,
200Ci Cobalt-60 S/N JLS-12177-3, as of August 20, 1997, and Model 484 (Model 81-22) S/N 7133, w/ (RC)
100Ci Cobalt-60 S/N JLS-8808-1 and 130Ci Cs-137, S/N 0255GY, as of October 22, 1994.

This facility is on our list.

If you require any further information, please do not hesitate to contact us.

Very truly yours,

J.L. SHEPHERD & ASSOCIATES

Lee Weiss
Lee Weiss
Contract Administrator

Authorizing Official:

M. C. Hernandez
Signature M. C. Hernandez
Radiation Specialist

Title:

5/4/99

9905130190 990504
PDR STPRG ESGCA
PDR

NE05
Copy to RIV



UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION IV

611 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TEXAS 76011-8064

MAY - 4 1999

MEMORANDUM Rita Messier
TO: License Fee & Accounts Receivable Branch (T9 E10)
FROM: Christi Hernandez
Nuclear Materials Licensing Branch, Region IV MCH.
SUBJECT: FEE TRANSMITTAL

A. Region IV

1. NRC FORM 241 ATTACHED

Applicant/Licensee:
NRC Form 241 Dated:
Agreement State License:
Program Code(s):

2. REVISION ATTACHED

Licensee:
Agreement State License:

3. CLARIFICATION ATTACHED

Licensee: *J. L. Shepherd & Associates*
Agreement State License: *CA 1777-19*

4. FEE ATTACHED

Amount: \$ Check: #

5. COMMENTS

B. LICENSE FEE & ACCOUNTS RECEIVABLE BRANCH

1. Fee Category and Amount: _____
2. Correct Fee Paid. Submittal may be processed for:
General License _____
Revision _____

Signed _____ Date _____