



### CONVERSATION RECORD

NAME OF PERSON(S)/TITLE CONTACTED OR IN CONTACT WITH YOU		DATE OF CONTACT	TYPE OF CONVERSATION	
Hillary Martel		12/04/2020	<input type="checkbox"/> E-MAIL	<input checked="" type="checkbox"/> INCOMING <input type="checkbox"/> OUTGOING
E-MAIL ADDRESS	TELEPHONE NUMBER		<input checked="" type="checkbox"/> TELEPHONE	
hmartel@spencerfane.com	(913) 244-4429			
ORGANIZATION	DOCKET NUMBER(S)			
St. Alexius Hospital	030-02303			
LICENSE NAME AND NUMBER(S)	MAIL CONTROL NUMBER(S)			
St. Alexius Hospital 24-01381-01	CN 623766			
SUBJECT				
Pending Transfer of Control Notification - St. Alexius Hospital				
SUMMARY AND ACTION REQUIRED (IF ANY) This is a record of the conversation between Laura Cender and Hillary Martel, representing SA Hospital Acquisition Group, LLC d/b/a South City Hospital in their planned indirect transfer of control of St. Alexius Hospital, NRC License No. 24-01381-01. Per our discussion today, please provide a response to the following items. You may submit your responses to me directly as an attachment via email.				
1. Please submit a copy of the notification request that is signed by senior representatives of both the transferee and transferor.				
Additionally, please update Item 4 to include additional details as to the status of calibrations, leak tests, area surveys, wipe tests, training, quality control, and related records. Specifically, please confirm that all records are up to date and that records will be transferred to the transferee.				
2. In order to establish a basis of confidence that the new purchasing company is a known entity, who will use and possess licensed materials in accordance with the conditions of the license, please provide one of the following:				
<ul style="list-style-type: none"> <li>- A current NRC nuclear materials license currently possessed under the direct or in-direct ownership of the purchaser.</li> <li>- A current Agreement State nuclear materials license currently possessed under the direct or in-direct ownership of the purchaser.</li> </ul>				
NAME OF PERSON DOCUMENTING CONVERSATION				
Laura B. Cender				
SIGNATURE			DATE OF SIGNATURE	
			12/04/2020	

**CONVERSATION RECORD (continued)**

LICENSE NAME AND NUMBER(S)	MAIL CONTROL NUMBER(S)
St. Alexius Hospital 24-01381-01	CN 623766

**SUMMARY AND ACTION REQUIRED (IF ANY) (Continued)**

2. Cont.

- A current State or federal government license, registration, or authorization for other operations within the scope of the proposed licensed activities.

Alternatively, we may also schedule a pre-licensing site visit if the purchaser has not been previously licensed for nuclear materials or similar operations.

3. Notifications after transaction closure:

- Please provide notice of the transaction closure and confirm the requested name change at that time.
- Please submit a copy of NRC Form 531 (attached) updating any changes to the Federal Tax ID for the licensee.



**PRIVACY ACT STATEMENT**  
**NRC FORM 531**  
**REQUEST FOR TAXPAYER IDENTIFICATION NUMBER**

Pursuant to 5 U.S.C. 552a(e)(3), enacted into law by Section 3 of the Privacy Act of 1974 (Public Law 93-579), the following statement is furnished to individuals who supply information to the Nuclear Regulatory Commission (NRC) on NRC Form 531. This information is maintained in a system of records designated as NRC-32 and described at 81 *Federal Register* 81342 (November 17, 2016), or the most recent *Federal Register* publication of the NRC's Systems of Records Notices that is located in the NRC's Agencywide Documents Access and Management System (ADAMS).

1. **AUTHORITY:** U.S.C. 552a; 5 U.S.C. 5514; 15 U.S.C. 1681; 26 U.S.C. 6103; 31 U.S.C. chapter 37; 31 U.S.C. 6501 -6508; 42 U.S.C. 2201; 42 U.S.C. 5841; 31 CFR 900 -904; 10 CFR parts 15, 16, 170, 171; Executive Order (E.O.) 9397, as amended by E.O. 13478; and E.O. 12731.
2. **PRINCIPLE PURPOSE(S):** To obtain taxpayer identification number/social security number/individual taxpayer identification number to enable the NRC to process payments and collect/report delinquent debts.
3. **ROUTINE USES:** Information from this form may be transmitted to: debt collection contractors and/or Federal agencies for collecting delinquent debts and/or collection action on such debts; any Federal, State or local agencies to conduct authorized computer matching programs and to credit reporting agencies; Treasury on past due nontax debts for the purpose of locating the debtor and/or effecting offset under Treasury Offset Program. Information may be publicly disseminated regarding the identity of delinquent nontax debtors and the existence of nontax debts under the provisions of the Debt Collection Improvement Act of 1996. Information may be disclosed in accordance with any of the Routine Uses listed in the Prefatory Statement of General Routine Uses, including to an appropriate Federal, State, local or Foreign agency in the event the information indicates a violation or potential violation of law; in the course of an administrative or judicial proceeding; to an appropriate Federal, State, local and foreign agency to the extent relevant and necessary for an NRC decision about you or to the extent relevant and necessary for that agency's decision about you; in the course of discovery under a protective order issued by a court of competent jurisdiction, and in presenting evidence; to a Congressional office to respond to their inquiry made at your request; to NRC-paid experts, consultants, and others under contract with the NRC, on a need-to-know basis; or to appropriate persons and entities for purposes of response and remedial efforts in the event of a suspected or confirmed breach of data from this system of records.
4. **WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL OF NOT PROVIDING INFORMATION:** It is mandatory that you furnish the requested information pursuant to the Debt Collection Improvement Act of 1996 (Public Law 104-134). If you do not provide the requested information, we may no longer be able to conduct business with you, and if you are due a refund, you may give up your rights to your refund.
5. **SYSTEM MANAGER AND ADDRESS:** Controller, Division of the Controller, Office of the Chief Financial Officer, U.S. Nuclear Regulatory Commission, Washington, DC 20555-001.