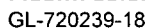


[illegible]



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01/08/2014

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

PAGE 1 of 2

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

NRC Device Key **750253** **(Internal Control Number)**

Distributor/Distributed By: OHMART/VEGA CORPORATION

[illegible]

Distributor License Number: 34-00639-03G

[illegible]

Manufacturer Name: OHMART/VEGA CORPORATION

[illegible]

Device Model (Not Source Model): SH-F1A

[illegible]

Device Serial Number: 6269GK

[illegible]

Transfer Date (Receipt Date): 06/16/2006

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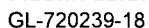
MM

DD

YYYY

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	CS137	40.000	



01/08/2014

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

PAGE 2 of 2

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

NRC Device Key **750254** **(Internal Control Number)**

Distributor/Distributed By: OHMART/VEGA CORPORATION

Distributor License Number: 34-00639-03G

Manufacturer Name: OHMART/VEGA CORPORATION

Device Model (Not Source Model): SH-F1A

Device Serial Number: 0557GK

Transfer Date (Receipt Date): 06/16/2006

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	CS137	40.000000000	mCi
2			
3			
4			
5			
6			



01/08/2014

SECTION 4

PAGE 1 of 1

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

Transfer Date:

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Y Y Y Y

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)
☐ Returned to Manufacturer (complete Part 1 only) (complete Part 2)

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

[illegible]

Company Name:

[illegible]

Department:

[illegible]

Address Line 1:

[illegible]

Address Line 2:

[illegible]

City:

[illegible]

State:

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Zip Code:

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Part 3

Enter the name of the individual responsible for this device:

Last Name:

[illegible]

First Name:

[illegible]

Middle Initial:

7

Telephone Number:

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Extension:

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Title:

[illegible]



GL-720239-18

01/08/2014

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.

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

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

Letz G. Dinnia

3-13-14

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.



GL-720239-18
01/08/2014



SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

SECTION 6

PAGE 1 of 1

NRC Device Key:

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date: