

CERTIFICATE OF DISPOSITION OF MATERIALS

(All items MUST be completed, please print)

LICENSEE NAME AND ADDRESS

George E. Bowman DPM
6130 Trier Rd
Ft Wayne, IN. 46815

LICENSE NUMBER

13-24372-01

LICENSE EXPIRATION DATE

NOV. 30. 1989

THE LICENSEE OR ANY INDIVIDUAL EXECUTING THIS CERTIFICATE ON BEHALF OF THE LICENSEE CERTIFIES THAT: (Check and/or complete the appropriate item(s) below.)

A. MATERIALS DATA (Check one and complete, as necessary)

- ☐ 1. NO MATERIALS HAVE EVER BEEN POSSESSED OR PROCURED BY THE LICENSEE UNDER THIS LICENSE.
- OR
- ☐ 2. ALL MATERIALS PROCURED AND/OR POSSESSED BY THE LICENSEE UNDER THE LICENSE NUMBER CITED ABOVE HAVE BEEN TRANSFERRED ON

DATE

6-1-87

TO

Lixi, Inc. 1438 Brook Dr
Downers Grove, IL 60515

WHICH HAS NRC LICENSE NUMBER

12-18215-01

- OR
- ☐ 3. ALL MATERIALS PROCURED AND/OR POSSESSED BY THE LICENSEE UNDER THE LICENSE NUMBER CITED ABOVE HAVE BEEN TRANSFERRED ON

DATE

TO

WHICH HAS LICENSE NUMBER

ISSUED BY THE STATE OF

AN AGREEMENT STATE PURSUANT TO SECTION 274 OF THE ATOMIC ENERGY ACT OF 1954, AS AMENDED, AND THE ENERGY REORGANIZATION ACT OF 1974.

- OR
- ☐ 4. MATERIALS HAVE BEEN DISPOSED OF IN THE FOLLOWING MANNER. (Describe specific disposal procedures—if additional space is needed, use the reverse of this form, or provide attachments)

B. OTHER DATA

- ☒ 1. OUR LICENSE HAS NOT YET EXPIRED. PLEASE TERMINATE IT.
- ☒ 2. WAS A RADIATION SURVEY CONDUCTED TO CONFIRM THE ABSENCE OF LICENSED RADIOACTIVE MATERIALS AND TO DETERMINE WHETHER ANY CONTAMINATION REMAINS ON THE PREMISES COVERED BY THE LICENSE? (Check one)
- ☒ NO
- ☐ YES, THE RESULTS (Check one)
- ☐ ARE ATTACHED, OR
- ☒ WERE FORWARDED TO NRC ON (Date) will forward to NRC test done on 6-1-87

3. THE PERSON TO BE CONTACTED REGARDING THE INFORMATION PROVIDED ON THIS FORM

NAME

George Bowman DPM

TELEPHONE NUMBER

219-485-7387

4. MAIL ALL FUTURE CORRESPONDENCE REGARDING THIS LICENSE TO

George Bowman DPM

6130 Trier Rd Ft Wayne IN 46815

RETURN TO

U. S. Nuclear Regulatory Commission
Office of Inspection & Enforcement
Region III
799 Roosevelt Road
Glen Ellyn, Illinois 60137

BB01250029 870806

REG3 LIC30

13-24372-01

PDR

SIGNATURE

CERTIFYING OFFICIAL

DATE

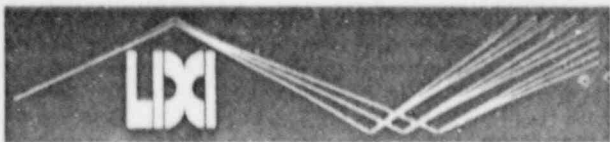
PRINTED NAME AND TITLE

George Bowman DPM

JUN 3 1987

REGION III

President/owner



INVOICE

INVOICE NO. 2962
CUSTOMER NO.
INV. DATE 5/27/87
PAGE NO.

BILL TO: 1143
Bowman Foot Clinic P.C.
6130 Trileer Road
Fort Wayne IN 46815

SHIP TO: Same

SHIP DATE	P.O. NO.	TERM	VIA	REGION NO.	ORDER DATE	ORDER NO.			
5/27/87	ck. 2733	prepaid		01	5/26/87	3024			
QTY. ORDER	QTY. SHIP	ITEM NO.	DESCRIPTION			UNIT PRICE	DIS %	T X	EXTENDED AMOUNT

1

Disposal fee for I-125 Isotope

Paid by
Check #2733

SALE TOTAL

SALE TAX
FREIGHT
INVOICE TOTAL

PLEASE REMIT TO:

LIXI, INC.
1438 BROOK DRIVE
DOWNERS GROVE, IL 60515
312-620-4646

*Lic. #
for NRC*