								Page	of		
NRC FORM 653 (11-2002)		U.S. NU	CLEAR REGULATORY CO	MMISSION	APPROVED	BY OMB: NO. 31	50-0001	EXPIRES:	08/31/2002		
			L DEVICES REPO		request: 24 r device move Records Ma Commission bjs1@nrc.g Regulatory A and Budget, information number, the	arden per response ninutes. NRC requirements. Send com- nagement Branna, Washington, Do- town and to the Di- taffairs, NEOB-102 Washington, DC collection does in to NRC may not co perspond to, the infor-	uests quarterluments regard th (T-6 E6), C 20555-000, esk Officer, 02, (3150-00) C 20503. If a ot display a sonduct or sp	ly reports to keep ding burden esti , U.S. Nuclear 01, or by intern Office of Infor 001), Office of M means used to currently valid C onsor, and a pe	apprised of mate to the Regulatory et e-mail to mation and Management impose an DMB control		
NAME OF VENDOR				l		REPORTING	PERIOD				
LICENSE NUMBER			W. V. WAA		FROM			ТО			
Fo	or each "person"	to whom a	device(s) has been transfer	red during tl	he reporting	period, supply	the followi	ing:			
			INTERMEDIATE PE	RSON (if a	ny)						
NAME OF INTERMEDIATE	PERSON	NAME OF R	ESPONSIBLE INDIVIDUAL	TITLE OF RE	ESPONSIBLE	INDIVIDUAL		TELEPHONE			
			GENERAL LICENSEE US	SER INFORM	MATION						
NAME OF GENERAL LICENSEE USER					MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)						
DEPARTMENT			The state of the s								
NAME OF RESPONSIBLE	INDIVIDUAL		TELEPHONE								
TITLE OF RESPONSIBLE	INDIVIDUAL		I								
			INFORMATION ON DEVIC	E(S) TRANS	SFERRED						
DATE OF TRANSFER	TYPE OF D	EVICE	MODEL NUMBER	SERIAL	NUMBER	ISOTOPE	AC	TIVITY AND U	INITS		
INTERMEDIATE F NAME OF INTERMEDIATE PERSON NAME OF RESPONSIBLE INDIVIDUAL											
NAME OF INTERMEDIATE PERSON NAME OF RESPONS			ESPONSIBLE INDIVIDUAL	L TITLE OF RESPONSIBLE INDIVIDUAL				TELEPHONE			
			GENERAL LICENSEE US	SER INFORM	MATION						
NAME OF GENERAL LICE	NSEE USER			MAILING AD	DRESS AT TH	IE LOCATION OF	USE (No., F	2.O. Boxes, inclu	de Zip Code)		
DEPARTMENT											
NAME OF RESPONSIBLE	INDIVIDUAL		TELEPHONE								
TITLE OF RESPONSIBLE	INDIVIDUAL										
DATE OF	!		INFORMATION ON DEVIC	E(S) TRANS	SFERRED						
DATE OF TRANSFER	TYPE OF D	EVICE	MODEL NUMBER	SERIAL	NUMBER	ISOTOPE	AC	TIVITY AND U	INITS		
NRC FORM 653 (11-2000)	-					-	P	RINTED ON RECY	CLED PAPER		

NRC FORM 6537 (11-2000) 10 CFR 32	4			U.S. NUCLEAR REGULATORY COMMISSION			
10 CFR 32	TRA	ANSFERS OF I	NDUSTRIAL D	EVICES REPORT (Continuation)			
	For each "	person" to whom a de	evice(s) has been recei	ved during the reporting period, supply the following:			
			GENERAL LICENSEE				
NAME OF GENERA	AL LICENSEE USER	₹		MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Cox			
DEPARTMENT			THE CONTRACTOR OF THE CONTRACT				
			INFORMATION ON D	EVICE(S) RECEIVED			
DATE OF RECEIPT	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	MANUFACTURER OR INITIAL TRANSFEROR (IF NOT REPORTING PARTY)			
							
		-		94 444			
			GENERAL LICENSEE	USER INFORMATION			
NAME OF GENERA	AL LICENSEE USER	₹		MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)			
DEPARTMENT							
			INFORMATION ON D	EVICE(S) RECEIVED			
DATE OF RECEIPT	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	MANUFACTURER OR INITIAL TRANSFEROR (IF NOT REPORTING PARTY)			
INCOCK 1	. DEVICE			(IF NOT REPORTING PARTY)			
			GENERAL LICENSEE	USER INFORMATION			
NAME OF GENERA	AL LICENSEE USER	₹		MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)			
DEPARTMENT							
			INFORMATION ON D				
DATE OF RECEIPT	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	MANUFACTURER OR INITIAL TRANSFEROR (IF NOT REPORTING PARTY)			
<u> </u>							
	.						
NAME OF OTHER	N LIGENSEE LIGES		GENERAL LICENSEE				
NAIVIE OF GENERA	AL LICENSEE USEF	ζ		MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)			
DEPARTMENT							
			INFORMATION ON D	EVICE(S) RECEIVED			
DATE OF RECEIPT	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	MANUFACTURER OR INITIAL TRANSFEROR			
1,500	DEVIOL			(IF NOT REPORTING PARTY)			
		71,780,744					
	 						

NRC FORM 653B (11-2000) 10 CFR 32	TRANS	SFERS OF IN	DUSTRIAL D	EVICES REF	u.s. NU	CLEAR REGULATO	RY COMMISSION		
	For each	device for which	required label inform	nation has been ch	nanged, supply the f	ollowing:			
		G	ENERAL LICENSEE	USER INFORMAT	ION				
NAME OF GENERAL	LICENSEE USER			MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)					
DEPARTMENT									
		ı	NFORMATION ON D	EVICE(S) RECEIV	'ED				
TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIA L NUMBER	NEW SERIAL NUMBER, IF CHANGED	PREVIOUS ISOTOPE	NEW ISOTOPE, IF CHANGED	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS, IF CHANGED		
and the second s									
			ENERAL LICENSEE	LISER INFORMAT	ION				
NAME OF GENERAL	LICENSEE USER		LINEINAL EIGENSEE			OF USE (No P.O. Boxe	es, include Zip Code)		
DEPARTMENT							, , ,		
			NFORMATION ON E	PEVICE(S) RECEIVED					
TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIA L NUMBER	NEW SERIAL NUMBER, IF CHANGED	PREVIOUS ISOTOPE	NEW ISOTOPE, IF CHANGED	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS, IF CHANGED		
	I	G	ENERAL LICENSEE	USER INFORMAT	TION				
NAME OF GENERAL	LICENSEE USER			MAILING ADDRE	SS AT THE LOCATION	OF USE (No P.O. Boxe	es, include Zip Code)		
DEPARTMENT									
			NFORMATION ON E	EVICE(S) RECEIV	ΈD				
TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIA L NUMBER	NEW SERIAL NUMBER, IF CHANGED	PREVIOUS ISOTOPE	NEW ISOTOPE, IF CHANGED	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS, IF CHANGED		
		G	ENERAL LICENSEE	USER INFORMAT	TION				
NAME OF GENERAL DEPARTMENT	LICENSEE USER	, , <u></u>		MAILING ADDRE	SS AT THE LOCATION	I OF USE (No P.O. Boxe	es, include Zip Code)		
			NFORMATION ON E	EVICE(S) RECEIV	ED				
TYPE OF DEVICE	MODEL NUMBER	PREVIOUS SERIA L NUMBER	NEW SERIAL NUMBER IF CHANGED	PREVIOUS ISOTOPE	NEW ISOTOPE, IF CHANGED	PREVIOUS LABEL ACTIVITY AND UNITS	LABEL ACTIVITY AND UNITS, IF CHANGED		
		!							