

APPENDIX 3-D
ILLINOIS STATE UNIVERSITY
RADIATION SAFETY COMMITTEE
CHAIRMAN 438-8325

LICENSED MATERIAL TRANSFER REPORT

Material being transferred from:

Institution: _____
Individual: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number: _____
Radioactive material license number (include state name): _____

Material to be transferred to:

Institution: _____
Individual: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone number: _____
Radioactive material license number (include state name): _____

Material to be transferred:

<u>Isotope</u>	<u>Amount (mCi)</u>	<u>Chemical Form</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Method by which the transfer will occur: _____

Approval of ISU's
Radiation Safety Committee: _____ Date: _____

Approval of other Agency's
Radiation Safety Committee: _____ Date: _____

Transferred by: _____ Date: _____

Received by: _____ Date: _____