

Appendix L

UNIVERSITY OF NORTH FLORIDA RADIATION SAFETY PROGRAM ISOTOPE RECEIPT/DISPOSAL FORM

RECEIPT DISPOSAL (all isotope consumed, now waste)

Date: _____

Authorized User (Primary Investigator): _____

Isotope: 3H 32P 33P 35S 14C 45Ca 55Fe 36Cl 65Zn 125I

Chemical Form: _____

Assay Date: _____

Quantity(mCi): _____

*UNF Authorization Number: _____

*UNF Authorization number is provided by EH&S.