Notice of Registration Certificate for Ionizing Radiation Machine

1. Name of Registrant: UNIVERSITY OF ARIZONA LOWELL STEVENS FOOTBALL FACILITY
2. Facility Address: 640 North Vine Avenue, Tucson, AZ 85719
3. Type of Facility: MEDICAL
4. Expiration Date: August 31, 2023
5. Registration Number: 10-M-10134

<table>
<thead>
<tr>
<th>Unit Number</th>
<th>Manufacturer</th>
<th>Model Name or Model Number</th>
<th>Machine Type &amp; Sub-type</th>
<th>Number of X-Ray Tubes/Unit</th>
<th>Room Number or Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>HOLOGIC</td>
<td>INSIGHT II</td>
<td>Mobile C-Arm Fluoroscopic</td>
<td>1</td>
<td>Room 167 (M2135)</td>
</tr>
</tbody>
</table>

Conditions:

6. The Registrant shall notify The Arizona Radiation Regulatory Agency within thirty days of any change which renders the information contained in the application no longer accurate. A change in the ownership or possession of the x-ray source shall terminate this registration.
7. No person in any advertisement shall refer to the fact that a source of radiation is registered with the Arizona Radiation Regulatory Agency and no person shall state or imply that any activity under this registration has been approved by this Agency.
8. The Registrant shall comply with all applicable provisions of the Arizona Radiation Regulatory Agency Rules.
9. The equipment registered is for the use stated in item 3 above.

POST IN ACCORDANCE WITH R12-1-1002

The Registrant’s installation and the non-licensed source(s) of radiation is(are) hereby duly registered pursuant to A.R.S. § 30-672 and in reliance on statements and representations heretofore made by the registrant in application dated: August 16, 2013.

Staff Init. Date: September 13, 2013
Aubrey V. Godwin, Director