

OFFICE OF CIVILIAN RADIOACTIVE WASTE MANAGEMENT  
DOCUMENT SUBMITTAL

1. QA: ~~NA~~ QA: QA 1/7/05  
2. Page 1 of 1  
DC# 43639  
43639 1/7/05

Complete only applicable items.

TO BE COMPLETED BY PREPARER/ORIGINATOR

3. Document Number (Use separate sheet for multiple documents) B00000000-01717-5705-00101	4. Revision/Change Number Rev 01	5. Document QA Designation <input checked="" type="checkbox"/> QA:QA <input type="checkbox"/> QA:N/A
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6. Document Title (Use separate sheet if necessary)  
RANGE OF NEUTRONIC PARAMETERS FOR RESPOSITORY CRITICALITY ANALYSES (DC #23018) 1/7/05

7. Document Submittal Date (MM/DD/YYYY) 01/05/2005	8. Document Approval Date (MM/DD/YYYY) 01/05/2005	9. Document Effective Date (MM/DD/YYYY) (Enter N/A if no effective date) NA Does this revision allow for the use of the previous version? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, the allowance will expire (MM/DD/YY) _____
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18. Submitted By (Print Name/Sign/Date)  
Dennis Thomas 1-5-05

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19. Received By (Print Name/Initial/Date) Heather Podonell AP 01-05-05 P03:48	20. Accepted By (Print Name/Initial/Date) Michael Pinnery 1/7/05
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