

1. COMPANY NUMBER: 2237E
2. MODEL NUMBER: ION-U L 7/8/85/17P/19P
3. MANUFACTURER: Andrew Wireless Systems GmbH
4. TYPE OF EVALUATION: (c) RF Evaluation)

Note: The worst-case scenario (i.e. highest measured value obtained) should be reported.

(a) SAR Evaluation: Device used in the Vicinity of the Human Head

- Multiple transmitters: Yes ☐ No ☐
- Evaluated against exposure limits: General Public Use ☐ Controlled Use ☐
- Duty cycle used in evaluation: _____%
- Standard used for evaluation: _____
- SAR value: _____ W/kg. Measured ☐ Computed ☐ Calculated ☐

(b) SAR Evaluation: Body-worn Device

- Multiple transmitters: Yes ☐ No ☐
- Evaluated against exposure limits: General Public Use ☐ Controlled Use ☐
- Duty cycle used in evaluation: _____%
- Standard used for evaluation: _____
- SAR value: _____ W/kg. Measured ☐ Computed ☐ Calculated ☐

(c) RF Evaluation

- Evaluated against exposure limits: General Public Use ☒ Controlled Use ☐
- Duty cycle used in evaluation: 100 %
- Standard used for evaluation: IEEE C95.3
- Measurement distance: 9.334 meter (f.e. 29 dBi gain)
- RF value: 10 and 4.85 V/m ☐ A/m ☐ W/m² ☒
- Measured ☐ Computed ☐ Calculated ☒

ATTESTATION: I attest that the information listed above is correct; that a Technical Brief was prepared and the information it contains is correct; that the device evaluation was performed or supervised by me; that applicable measurement methods and evaluation methodologies have been followed and that the device meets the SAR and/or RF exposure limits of RSS-102.

Signature: _____ Date: **28.02.2013**

NAME : **Dipl.-Ing. (FH) Tom Zahlmann**

TITLE : **EMC Testengineer**

COMPANY: **TEMPTON Service Plus GmbH**