

DATE: 4/10/02

TO: Shirley Crutchfield, OCFO/DAF/LFARB
FROM: Sheryl Villar, RI/DNMS/LAT

Region I Transmittal Form for
Reciprocity Submittals (NRC FORM 241)

INITIAL 241 PACKAGE REVISION

LICENSEE NAME: NY-2930-4164

LICENSE NO. Testwell Labs., Inc.

CHECK NO. 306615 CHECK AMOUNT \$ 1400.00

PACKAGE ACCESSION NO. IN ADAMS: ML 021060766

ATTACHMENTS:

1. CHECK
2. COPY OF CHECK

2002 MAY -2 PM 9:40

Log	<u>May 1 241</u>
Remitter	
Check No.	<u>306615</u>
Amount	<u>1400</u>
Fee Category	<u>16</u>
Type of Fee	<u>App</u>
Date Check Rec'd.	
Date Completed	<u>5/2/02</u>
By	<u>SC</u>

Rev. 04/19/01