

: (FOR LFMS USE)  
: INFORMATION FROM LTS  
: -----  
:  
: Program Code: 03320  
: Status Code: 0  
: Fee Category: 30 2B  
: Exp. Date: 20110131  
: Fee Comments: \_\_\_\_\_  
: Decom Fin Assur Req: N  
: ::

BETWEEN:  
License Fee Management Branch, ARM  
and  
Regional Licensing Sections

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED  
Applicant/Licensee: QUALITY TESTING SERVICES, INC.  
Received Date: 20041220  
Docket No: 3035610  
Control No.: 314009  
License No.: 24-32292-01  
Action Type: Amendment

2. FEE ATTACHED  
Amount: \_\_\_\_\_  
Check No.:   0  

3. COMMENTS  
Signed D.A. Hersey  
Date 1-10-2005

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /\_/)

1. Fee Category and Amount: \_\_\_\_\_

2. Correct Fee Paid. Application may be processed for:  
Amendment \_\_\_\_\_  
Renewal \_\_\_\_\_  
License \_\_\_\_\_

3. OTHER \_\_\_\_\_

Signed \_\_\_\_\_  
Date \_\_\_\_\_