

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LFMS USE)
INFORMATION FROM LTS

Program Code: 03620
Status Code: 2
Fee Category: EX 3M 1D
Exp. Date: 20041231
Fee Comments: 170.11(A)(4)EFF. 10/10/91
Decom Fin Assur Req'd: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED
Applicant/Licensee: ST. CLOUD STATE UNIVERSITY
Received Date: 20041207
Docket No: 3009782
Control No.: 313969
License No.: 22-15594-02
Action Type: Renewal

2. FEE ATTACHED
Amount:
Check No.:

3. COMMENTS

Signed
Date

K. J. Bernardini
12-16-04

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

