

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

Program Code: 03610
Status Code: 0
Fee Category: EX 3L 1D 2C
Exp. Date: 20121231
Fee Comments: 170.11(A)(4)
Decom Fin Assur Reqd: Y

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED
Applicant/Licensee: CURATORS OF THE UNIVERSITY OF MO
Received Date: 20050907
Docket No: 3032692
Control No.: 314817
License No.: 24-00513-40
Action Type: Decommissioning

2. FEE ATTACHED
Amount: _____
Check No.: Ø

3. COMMENTS

Signed D.A. Hersey
Date 9-15-2005

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 _____