

CASSANDRA F. FRAZIER
MATERIALS LICENSING BRANCH
UNITED STATES

TELECON & FAX TRANSMITTAL

TO: _____ COMPANY: _____

NUCLEAR REGULATORY COMMISSION
REGION III

#PAGES: _____ TEL. _____



2443 WARRENVILLE ROAD
LISLE, ILLINOIS 60532-4352
(630)829-9830 FAX: (630)515-1259

FAX #: _____

CONVERSATION RECORD

TIME
9:00am

DATE
2/24/06

NAME OF PERSON(S) CONTACTED

ORGANIZATION

TELEPHONE NO.

M. Kiran Kancherla, M.D.

Metro Heart Group

(314) 997-6001

SUBJECT

Co. No. 315043

SUMMARY

The licensee has resubmitted a request to add the RSO and this action should be voided.

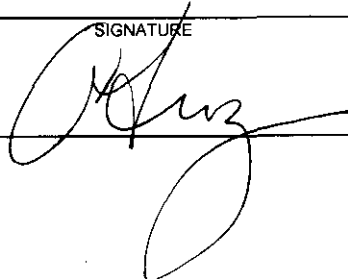
ACTION REQUIRED

VOID

NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

Cassandra F. Frazier

1  2/24/06