

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

(FOR LFMS USE)  
INFORMATION FROM LTS  
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: Program Code: 02500  
: Status Code: 0  
: Fee Category: 3C 3P EX 2B  
: Exp. Date: 20150731  
: Fee Comments: \_\_\_\_\_  
: Decom Fin Assur Req: N  
: .....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: CARDINAL HEALTH  
Received Date: 20060227  
Docket No: 3036973  
Control No.: 307602  
License No.: 34-29200-01MD  
Action Type: Amendment

2. FEE ATTACHED

Amount: \_\_\_\_\_  
Check No.: Ø

3. COMMENTS

Signed D.A. Hersey  
Date 3-9-2006

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

- 1. Fee Category and Amount: \_\_\_\_\_
- 2. Correct Fee Paid. Application may be processed for:
  - Amendment \_\_\_\_\_
  - Renewal \_\_\_\_\_
  - License \_\_\_\_\_
- 3. OTHER \_\_\_\_\_

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