

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

Program Code: 03121
Status Code: 0
Fee Category: 3P
Exp. Date: 20110228
Fee Comments: _____
Decom Fin Assur Req: N
.....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: WILLIAM A. GREEN & ASSOCIATES
Received Date: 20060911
Docket No: 3033970
Control No.: 315724
License No.: 24-26219-02
Action Type: Termination

2. FEE ATTACHED

Amount: _____
Check No.: 0

3. COMMENTS

Signed K. L. Bernardin
Date 9-21-06

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 _____