

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

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

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: HBAR TECHNOLOGIES, LLC
Received Date: 20060919
Docket No: 3037341
Control No.: 315725
License No.:
Action Type: New Licensee

2. FEE ATTACHED

Amount: \$2,000.00
Check No.: 2244

3. COMMENTS

Signed H. L. Cuscardio
Date 9-21-06

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered 1/1)

1. Fee Category and Amount: _____

See attached fee sheet

2. Correct Fee Paid. Application may be processed for:

Amendment _____
Renewal _____
License /

3. OTHER _____

Signed _____
Date _____

FEE INFORMATION

Log Page: Sept 2 (Region III)

Mail Control: 315725

Company Name: HBAR Technologies, LLC

License Number: NEW

Type of Fee: Application

Fee Category: 1D

Check number: 2244

Amount Received: \$2,000.00

Completed By: Brenda Brown