BETWEEN:
License Fee Management Branch, ARM
and
Regional Licensing Sections

and

INFORMATION FROM LTS
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Program Code: 02121
Status Code: 0
Fee Category: 7C
Exp. Date: 20111031
Fee Comments: Deco Fin Assur Req'd: N

LICENSE FEE TRANSMITTAL

A. REGION
1. APPLICATION ATTACHED
   Applicant/Licensee: PUTNAM COUNTY HOSPITAL
   Received Date: 20070104
   Docket No.: 3032363
   Control No.: 315939
   License No.: 13-26028-02
   Action Type: Amendment

2. FEE ATTACHED
   Amount:
   Check No.: 

3. COMMENTS
   Signed Date

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