



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION IV
611 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TEXAS 76011-4005

VOID SHEET

TO: License Fee and Accounts Receivable Branch
FROM: Region IV, DNMS, NMLB
SUBJECT: VOIDED Amendment APPLICATION
Applicant: Health & Human Services, Phoenix Area Indian Health Service
License No.: 02-19495-01
Control No.: 471335
Docket No.: 030-17788

Reason for Void:
Licensee was notifying NRC of management change only. RSO remains unchanged and no amendment is necessary.

Reviewer: Jim Montgomery \RA\
Date: 5/23/07

Licensing Assistant: _____
Date:

Attachment:
Official Record Copy of Voided Action
or
ML Control No. of Voided Action: ML071160170

FOR LFMB USE ONLY

Refund Authorized and Processed
 No Refund
 Fee Exempt or Fee Not Required

Comments:

Log Completed

Processed By: _____