



UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, ILLINOIS 60532-4352

JUN 08 2007

William S. Sarnat, M.D.
Radiation Safety Officer
Cardiology Division
Midwest Medical Group, LLC
837 East Cedar Street
Suite 420
South Bend, IN 46617

Dear Dr. Sarnat:

This refers to your letter dated March 14, 2007, and to our telephone conversation with Gale Bartalone on June 4, 2007. During the telephone conversation, we discussed voiding your request at this time to allow you time to gather the additional information so that we may complete our review. We will void your request without prejudice to resubmission. Please submit the additional information as requested in the enclosed memo.

When you resubmit your request please state that the resubmission is additional information to **Voided Control 316127**.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). The NRC's document system is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

If you have any questions or require clarification on any of the information stated above, you may contact us at (630) 829-9887.

Sincerely,

A handwritten signature in cursive script that reads "William P. Reichhold".

William P. Reichhold
Materials Licensing Branch

License No. 13-26679-01
Docket No. 030-33963

Enclosed: Memo

VOID SHEET

TO: License Fee Management Branch
FROM: Region 3
SUBJECT: VOIDED APPLICATION

Control number: 316127

Applicant: Midwest Medical Group, LLC

License Number: 13-26679-01

Docket Number: 03033963

Date Voided: June 4, 2007

Reason for Void: The licensee submitted incomplete and unclear information in request for new authorized user. Needs to resubmit information.

W. P. REICHHOLD
W. P. Reichhold

June 4, 2007

Signature

Date

Attachment:
Official Record Copy of
Voided Action

FOR LFMB USE ONLY

_____ Refund Authorized and processed

_____ No Refund Due

_____ Fee Exempt or Fee Not Required

Comments

Log completed

Processed by: