

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Colleen Carol Casey

SUBJECT: VOIDED APPLICATION

Control Number: 316413

Applicant: D. Mark Bickus, MD

License Number: 13- 32474-01

Docket Number: 030-36390

Date Voided: 10/5/07

Reason for Void: The application was too deficient to  
continue to process - reactivate upon receipt of written  
response.

Colleen Carol Casey 10/5/07  
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: \_\_\_\_\_