

December 17, 2007

RECEIVED  
REGION 1

RE: License No. 47-17725-02

03029017

2007 DEC 20 PM 1:13

NMSB1

Enclosed please find an Application Amendment to the above referenced license.

The Authorized users on this license are as follows:

- A. Mohammad Ebrabim Dehgen, MD.
- B. Alex A. Favelukes, MD
- C. Jebran G. Karam, MD.
- D. Bharat G. Patel, MD.
- E. Manu N. Patel, MD
- F. Lingadahalli H. Subbaraya, MD.
- G. Thair A. Bargouthi, MD
- H. Halberto G. Cruz, MD.
- I. Wilson Wong, MD

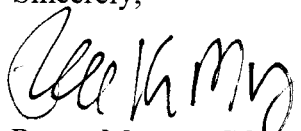
Please remove the following users:

- A. Mohammad E. Dehgen, MD.
- B. Lingadahalli H. Subbaraya, MD.
- C. Wilson Wong, MD.

Attached you will find the application along with the training documentation for Sukhdev Aujla, MD. Please advise us of any additional requirements that are necessary to effectuate this change. Should you have any questions, please contact me at (304) 255-3456

Thank you,

Sincerely,



Rocco Massey, CCEO

141470

**NRC FORM 313**  
(10-2005)  
10 CFR 30, 32, 33,  
34, 35, 36, 39, and 40

**U.S. NUCLEAR REGULATORY COMMISSION**

**APPROVED BY OMB: NO. 3150-0120**

**EXPIRES: 10/31/2008**

Estimated burden per response to comply with this mandatory collection request: 4.4 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to [infocollects@nrc.gov](mailto:infocollects@nrc.gov), and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0120), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

**APPLICATION FOR MATERIALS LICENSE**

**INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.**

**APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:**

DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY  
OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS  
U.S. NUCLEAR REGULATORY COMMISSION  
WASHINGTON, DC 20555-0001

**ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:**

**IF YOU ARE LOCATED IN:**

ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:

LICENSING ASSISTANCE TEAM  
DIVISION OF NUCLEAR MATERIALS SAFETY  
U.S. NUCLEAR REGULATORY COMMISSION, REGION I  
475 ALLENDALE ROAD  
KING OF PRUSSIA, PA 19406-1415

**IF YOU ARE LOCATED IN:**

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:

MATERIALS LICENSING BRANCH  
U.S. NUCLEAR REGULATORY COMMISSION, REGION III  
2443 WARRENVILLE ROAD, SUITE 210  
LISLE, IL 60532-4352

ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MISSISSIPPI, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO:

NUCLEAR MATERIALS LICENSING BRANCH  
U.S. NUCLEAR REGULATORY COMMISSION, REGION IV  
611 RYAN PLAZA DRIVE, SUITE 400  
ARLINGTON, TX 76011-4005

**PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.**

1. THIS IS AN APPLICATION FOR (Check appropriate item)

A. NEW LICENSE

B. AMENDMENT TO LICENSE NUMBER 47-17725-02

C. RENEWAL OF LICENSE NUMBER \_\_\_\_\_

2. NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code)

**Beckley Appalachian Regional Hospital**  
**306 Stanaford Road**  
**Beckley, WV 25801**

3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED

4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

**Jerome Furrow RT, R**

TELEPHONE NUMBER

**255-3360**

SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

5. RADIOACTIVE MATERIAL

a. Element and mass number; b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time.

7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.

9. FACILITIES AND EQUIPMENT.

11. WASTE MANAGEMENT.

6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.

8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.

10. RADIATION SAFETY PROGRAM.

12. LICENSE FEES (See 10 CFR 170 and Section 170.31)

FEE CATEGORY	AMOUNT ENCLOSED \$

13. CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39, AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 62 STAT. 749 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

CERTIFYING OFFICER -- TYPED/PRINTED NAME AND TITLE: **Rocco Massey, CEO**

SIGNATURE: *Rocco Massey*

DATE: **12-17-07**

**FOR NRC USE ONLY**

TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED \$	CHECK NUMBER	COMMENTS

APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_

RECEIVED  
 REGION I  
 DEC 20 PM 1:13



Appalachian Regional Healthcare  
www.arh.org

November 21, 2007

NRC Region I  
475 Allendale Road  
King of Prussia, Pennsylvania 19406

Dear Sir/Madam:

03029017

I request that Sukhdev Aujla, MD be added as an authorized user of radioactive materials at Beckley ARH. Nuclear regulatory commission materials license number at Beckley ARH is 47-17725-02.

Dr. Aujla is presently under Williamson ARH Hospital's radioactive material license number 202-156-24. A copy is enclosed.

Sincerely,

Rocco K. Massey  
Community CEO

RKM/ps

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REGION I  
2007 DEC 20 PM 1:12

Training and Experience/Preceptor Statement  
(Medical Use of Radioactive Material)  
Radiation Control Branch  
Kentucky Cabinet for Health & Family Services

1. Name of Proposed User <b>SUKH DEV AUJLA</b>	2. Ky Medical License Number <b>40123</b>
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3. Certification		
A. Specialty Board <b>ABIM</b>	B. Category	C. Month & Year Certified <b>August 1997</b>

4. Training Received in Basic Radioisotope Handling Techniques			
Field of Training	Location and Date <i>Health and Radiological Seminars</i>	Type & Length	
		Lecture/ Laboratory (Clock Hours)	Supervised On-The-Job Experience (Clock Hours)
a. Radiation Physics & Instrumentation	Do	100 HRS	<b>Total 500 HRS</b> <b>FROM 11.6.2006 to 3.14.2007</b> <b>under Dr. VALAMANCHI</b> <b>See Item number 6.</b>
b. Radiation Protection	Do	30 HRS	
c. Mathematics pertaining to the use and measurement of radioactivity	Do	20 HRS	
d. Radiation Biology	Do	20 HRS	
e. Radiopharmaceutical Chemistry	Do	30 HRS	
<b>TOTAL</b>		<b>200 HRS</b>	

5. Experience			
Isotope	Where Gained	Duration (Clock Hours)	Type of Use

Preceptor Statement

Clinical Training & Experience

Isotope	Conditions Diagnosed/Treated	Number of Cases Involving Personal Participation	Comments
I-123 I-125 Or I-131	<u>Diagnosis of thyroid function</u> <u>Liver function studies</u> <u>Kidney function studies</u> <u>Determination of blood and Blood plasma volume</u> <u>Thyroid imaging</u> <u>Treatment of thyroid carcinoma</u> <u>Treatment of hyperthyroidism and cardiac condition</u> <u>In Vitro studies</u> <u>Detection of thrombosis</u> <u>Other (Specify)</u>		
<u>Se-75</u> <u>Yb-169</u> Or	<u>Pancreas imaging</u> <u>Cisternography</u>		
<u>In-111</u> <u>Xe-133</u> <u>Ga-67</u> <u>Tl-201</u> ✓ <u>Tc-99m</u> ✓	<u>Blood Flow studies and Pulmonary function studies</u> <u>Scanning studies</u> ✓ <u>Cardiac imaging</u> ✓ <u>Brain imaging</u> <u>Cardiac imaging</u> <u>Thyroid imaging</u> <u>Salivary gland imaging</u> <u>Blood pool imaging</u> <u>Placenta localization</u> <u>Liver and spleen imaging</u> <u>Lung imaging</u> <u>Bone imaging</u> <u>Other (Specify)</u>	400 CASES	DATES FROM 11/6/2006 TO 3/14/2007. DR SUKHODEV AUJLA PARTICIPATED IN PERFORMING & INTERPRETING CASES FOR TOTAL OF 500 HOURS
OTHER (Specify)			
<u>P-32 (Soluble)</u> <u>P-32 (Colloidal)</u>	<u>Treatment of Polythemia vera, Leukemia and bone metastases</u> <u>Intracavitary treatment</u>		
<u>P-32</u> <u>Au-198</u> <u>Co-60</u>	<u>Eye tumor localization</u> <u>Intracavitary treatment</u> <u>Intracavitary treatment</u> <u>Interstitial treatment</u>		

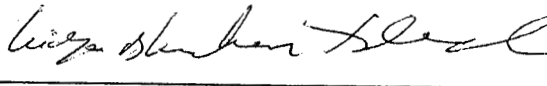
Cs-137; Or Ra-226	Intracavitary treatment Interstitial treatment		
I-125 Or Ir-192	Interstitial treatment		
Co-60 Or Cs-137	Teletherapy treatment		
Sr-90	Treatment of eye disease		
	RADIOPHARMACEUTICAL PREPARATION		
Mo-99M/ Tc-99m	Generators		
OTHER (Specify)	Generators		
Tc-99	Reagent kits		
OTHER	<p>- CEDARS SINAI MEDICAL CENTER Nuclear Cardiology and Cardiac C.T. Jan. 19-21, 2007, 22-HRS CATEGORY I Certificate attached</p> <p>- American college of Cardiology Foundation New approaches and procedures in office based nuclear cardiology and cardiac C-T. Dec 2-4, 2005 WASHINGTON DC. 21.5 Category Certificate attached 1 HRS.</p>		

6. Dates and Total Number of Hours Received in Clinical Radioisotope Training

Dates: FROM 10/6/2006 - 3/14/2007

Hours: 500 HOURS ATTENDED 43.5 HOURS OF CME RELATED TO NUCLEAR CARDIOLOGY.

*D. SUNDARAVAN AVILA ALSO*

7. The Training and Experience Indicated was Obtained Under the Supervision of: <b>Dr. YALAMANCHI</b>	8. Preceptor's Signature 
Name of Supervisor: <b>VIDYA B. YALAMANCHI</b>	9. Preceptor's NAME (Print or Type) <b>VIDYA B. YALAMANCHI</b>
Name of Institution: <b>APPALACHIAN HEART CENTER</b>	
Mailing Address: <b>200 MEDICAL CENTER DRIVE SUITE 2A</b>	
City, State & Zip: <b>HAZARD, KY 41701</b>	10. Date: <b>3/14/2007</b>
Radioactive Material License Number: <b>202-199-24</b>	



**APPALACHIAN REGIONAL HEALTHCARE**  
*The Medical Centers of the Mountains*

**Date:** 12/5/07

**To:** FILE

**From:** Pat Schuman, CPCS  
Medical Staff Coordinator

**Subject:** Sukhdev Aujla, MD  
Request for interpretation of nuclear studies

I verified with Vidya B. Yalamanchi, MD, Cardiologist at Hazard ARH that he did proctor Dr. Aujla during the period of November 2006 to March 2007 for 500 hours (400 cases) of nuclear imaging interpretations.

 **Appalachian Regional Healthcare**



**Vidya Bhushan Yalamanchi, MD**

**Office Address**

Appalachian Heart Center  
200 Medical Center Drive, Suite 2A  
Hazard KY 41701

**Phone:** (606) 439-4433

**Fax:** (606) 439-3537

**Specialties:**

Cardiology  
Internal Medicine

**Hospital Affiliation:**

Hazard ARH 11/12/1986 - 07/31/2008  
McDowell ARH 11/30/2007 - 07/31/2008  
Harlan ARH 08/02/2004 - 07/31/2008  
Whitesburg ARH 01/19/2007 - 07/31/2008



Vidya Bhushan Yalamanchi, MD

[PREV](#)

[New Search](#)

Page 8 of 8

Page printed from:

<http://arhiwww.arh.org/search/physician2.php?>

[curpage=8&fname=&lname=&sname=DRW40SUQK7&facname=+++++FAC5](http://arhiwww.arh.org/search/physician2.php?curpage=8&fname=&lname=&sname=DRW40SUQK7&facname=+++++FAC5)





CEDARS-SINAI MEDICAL CENTER.

*Certificate of Participation*

Cedars-Sinai Medical Center certifies that Sukhdev Aujla, MD has participated in the educational activity titled **Nuclear Cardiology and Cardiac CT: Case Review With The Experts** at Los Angeles, CA on January 19-21, 2007 and is awarded 22.0 *AMA PRA Category 1 Credits™*.

Course Number: 93001360

*Ellen W. Green*

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Ellen Wilson Green, MS  
Director, Medical Education

Cedars-Sinai Medical Center is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

# Health & Radiological Seminars Inc.

RECEIVED  
JUL 17 2006  
BY CMB

Hereby certifies that

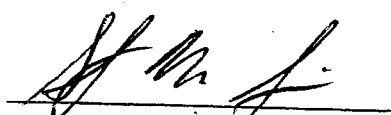
## ***SUKH DEV AUJLA, M.D.***

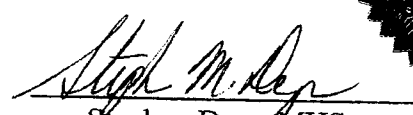
has successfully completed the 200 Hour Physician Training Program in Basic Radioisotope Handling conducted in accordance with the requirements of the U.S. Nuclear Regulatory Commission (10 CFR 35).

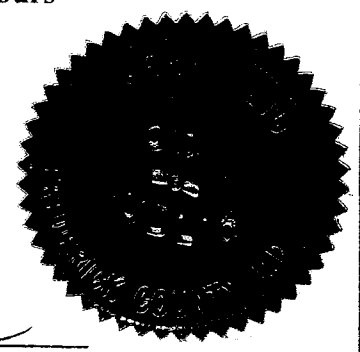
### **COURSE OUTLINE**

- Radiation Physics and Instrumentation - 100 hours**
- Mathematics pertaining to the use and measurement of radioactivity - 20 hours**
- Radiopharmaceutical Chemistry - 30 hours**
- Radiation Biology - 20 hours**
- Radiation Protection - 30 hours**

May 7, 2006

  
Stuart M. Simon  
Program Director

  
Stephen Dyer, MHS  
Scientific Advisor



# THE AMERICAN BOARD OF INTERNAL MEDICINE

INCORPORATED 1916

ATTESTS THAT

**Sukh Dev S. Anja**

HAS MET THE REQUIREMENTS OF THIS BOARD AND IS HEREBY

CERTIFIED FOR THE PERIOD 1997 THROUGH 2007

AS A DIPLOMATE IN

## INTERNAL MEDICINE

*Paul G. Kelly*  
CHIEF  
*John C. Casper*  
CHAIRMAN  
*R. F. Bone*  
SECRETARY  
*Henry R. Anderson*  
PRESIDENT  
*Jamieson A. Smith*  
*William N. Bennett*  
*John C. Bone*

*John C. Casper*  
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*Alan M. Fogelman*  
*Michael L. Huh*  
*John C. Kelly*  
*Manoj Kumar*



*Ralph H. Korwitz* *Richard W. Motowil*  
*Nancy D. Johnson* *James J. Langston*  
*Tom Loftholms* *David Powell*  
*Ronald V. Lopez* *James L. Rintoul*  
*Janette W. Madson* *John P. Zepf*  
*Anne Moore*

1997

NUMBER 52240

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FEB 08 2007

BY *CMR*

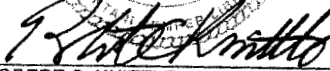
**WEST VIRGINIA BOARD OF MEDICINE**

LICENSE NO. 22365 ISSUED 7/10/2006

**THIS IS TO CERTIFY THAT THE LICENSE OF**

**SUKH DEV SINGH AULAKA, M.D.**

TO PRACTICE **MEDICINE AND SURGERY** IN THE  
STATE OF WEST VIRGINIA HAS BEEN RENEWED FOR  
THE PERIOD OF 7/10/2006 TO 6/30/2008

  
ROBERT C. KNITTLE, Executive Director

# CME CREDIT STATEMENT



The American College of Cardiology Foundation (ACCF) is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The American College of Cardiology Foundation (ACCF) certifies that

**SUKH DEV AUJLA M.D**

Registrant Name - *Required*

participated in the educational activity entitled **"New Approaches & Procedures in Office-Based Nuclear Cardiology & Cardiac CT"**  
December 2-4, 2005 in Washington, DC

and is awarded up to 21.5\* category 1 credit(s) toward the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he or she actually spent in the educational activity.

The American Medical Association has determined that physicians not licensed in the US who participate in this CME activity are eligible for AMA PRA category 1 credit.

*Karen N. Thompson*

Karen N. Thompson, CMP, Chief Education Specialist

**Instructions:**

Indicate hours claimed and return **yellow sheet** to the registration counter immediately following this conference. This is your official record of attendance. Please save for your records. Reporting is done on an honor basis. In the unlikely event this form is not returned, please mail within two weeks to ACC, ATTN: Resource Center 2005-1885, 9111 Old Georgetown Rd, Bethesda, MD 20814. Please note: if the ACC does not receive your claim form within two weeks, no CME credit will be applied to your activity record.

**COMPLETE INFORMATION BELOW: Indicate Total Hours Claimed**

	(v) Sessions Attended	CME Credits
<b>Friday, December 2, 2005</b>		
8:15 a.m. - 9:35 a.m.	<input type="checkbox"/>	1.25
9:35 a.m. - 10:15 a.m.	<input type="checkbox"/>	0.75
<b>10:15 a.m.</b>		
<i>Refreshment Break</i>		
10:30 a.m. - 11:30 a.m.	<input type="checkbox"/>	1.00
11:30 a.m. - 12:15 p.m.	<input type="checkbox"/>	0.75
<b>12:15 p.m. - 1:45 p.m.</b>	<input type="checkbox"/>	1.50
<i>Luncheon</i>	<input type="checkbox"/>	1.25
1:45 p.m. - 3:00 p.m.	<input type="checkbox"/>	1.25
<b>3:00 p.m.</b>		
<i>Refreshment Break</i>		
3:15 p.m. - 4:30 p.m.	<input type="checkbox"/>	1.25
4:30 p.m. - 5:45 p.m.	<input type="checkbox"/>	1.25
<b>5:45 p.m.</b>		
<i>Adjournment</i>		
		<b>Maximum credits allowed for Friday = 9.00</b>
<b>Saturday, December 3, 2005</b>		
8:00 a.m. - 9:00 a.m.	<input type="checkbox"/>	1.00
9:00 a.m. - 10:15 a.m.	<input type="checkbox"/>	1.25
<b>10:15 a.m.</b>		
<i>Refreshment Break</i>		
10:30 a.m. - 11:30 a.m.	<input type="checkbox"/>	1.00
11:30 a.m. - 12:15 p.m.	<input type="checkbox"/>	0.75
<b>12:15 p.m. - 1:45 p.m.</b>	<input type="checkbox"/>	1.50
<i>Luncheon</i>	<input type="checkbox"/>	1.25
1:45 p.m. - 3:00 p.m.	<input type="checkbox"/>	1.25
<b>3:00 p.m.</b>		
<i>Refreshment Break</i>		
3:15 p.m. - 4:30 p.m.	<input type="checkbox"/>	1.25
4:30 p.m. - 5:30 p.m.	<input type="checkbox"/>	1.00
<b>5:30 p.m.</b>		
<i>Adjournment</i>		
		<b>Maximum credits allowed for Saturday = 9.00</b>
<b>Sunday, December 4, 2005</b>		
8:10 a.m. - 8:40 a.m.	<input type="checkbox"/>	0.50
8:40 a.m. - 9:40 a.m.	<input type="checkbox"/>	1.00
9:40 a.m. - 10:15 a.m.	<input type="checkbox"/>	0.50
<b>10:15 a.m.</b>		
<i>Refreshment Break</i>		
10:30 a.m. - 11:00 a.m.	<input type="checkbox"/>	0.50
11:00 a.m. - 11:30 a.m.	<input type="checkbox"/>	0.50
11:30 a.m. - 12:00 p.m.	<input type="checkbox"/>	0.50
<b>12:00 p.m.</b>		

Program evaluation and CME credit statements will be collected at this time.

Maximum credits allowed for Sunday = 3.50

**\*NUMBER OF CME CREDITS AWARDED (Fill in) = 21.5**  
(Maximum Hours Allowable) = 21.50

05/23/2007 10:12 P.001/001

05/23/2007



**Appalachian Regional Healthcare**  
*The Medical Centers of the Mountains*

To Whom It May Concern:

Williamson Appalachian Regional Hospital would like to add Dr. Sukhdev Aujla to our Radiation Safety License. According to the Radiation Control Branch of the Kentucky Cabinet for Health & Family Services, Dr. Aujla has completed the requirements set forth.

He has obtained, and documented, 700 hours of training and experience in basic radionuclide handling techniques. He is only interested in performing Nuclear Cardiac studies.

A copy of his documentation is provided. If anything else is needed, please call the Radiology Director at Williamson ARH.

Sincerely,

Joseph Skeens, RSO

*Copy to Beckley ARH  
asking for transfer*

This is to acknowledge the receipt of your letter/application dated

12/17/2007, and to inform you that the initial processing which includes an administrative review has been performed.

AMEND. 47-17725-02  
There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

Please provide to this office within 30 days of your receipt of this card

---

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned **Mail Control Number** 141470.  
When calling to inquire about this action, please refer to this control number.  
You may call us on (610) 337-5398, or 337-5260.