

From: Penny Lanzisera
To: llbrandon@hearthosp.org
Date: Fri, Jan 11, 2008 1:24 PM
Subject: Request for Preceptor Statement

Licensee: Connecticut Multispecialty Group, P.C.
License No.: 06-14854-01
Docket No. 030-08163
Mail Control: 141464

Dear Lori,

In support of your request to add Dr. Melek, please provide a preceptor statement. **Part II** of NRC Form 313A (AUD) may be used. The form may be found at [http://www.nrc.gov/reading-rm/doc-collections/forms/nrc313a\(aud\).pdf](http://www.nrc.gov/reading-rm/doc-collections/forms/nrc313a(aud).pdf)

You may fax your response to my attention to 610-337-5269. Please reference Mail Control No. 141464 in your response.

Penny Lanzisera
US NRC, Region 1

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Subject: Request for Preceptor Statement
Creation Date: Fri, Jan 11, 2008 1:24 PM
From: Penny Lanzisera

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Recipients
hearthosp.org
llbrandon (llbrandon@hearthosp.org)

Post Office

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hearthosp.org

Files	Size	Date & Time
MESSAGE	1142	Friday, January 11, 2008 1:24 PM

Options
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Return Notification: None

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