

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

: (FOR LFMS USE)  
: INFORMATION FROM LTS  
: -----  
:  
: Program Code: 01100  
: Status Code: 0  
: Fee Category: EX 3L 1D 2C 3P  
: Exp. Date: 20120630  
: Fee Comments: 170.11(A)(4)  
: Decom Fin Assur Reqd: Y  
: .....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: MICHIGAN STATE UNIVERSITY  
Received Date: 20070907  
Docket No: 3000806  
Control No.: 300410  
License No.: 21-00021-29  
Action Type: Fin. Assurance

2. FEE ATTACHED

Amount: \_\_\_\_\_  
Check No.: 10

3. COMMENTS

Signed *Racina*  
Date 10/18/07

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /\_/)

1. Fee Category and Amount: \_\_\_\_\_

2. Correct Fee Paid. Application may be processed for:

Amendment \_\_\_\_\_  
Renewal \_\_\_\_\_  
License \_\_\_\_\_

3. OTHER \_\_\_\_\_

Signed \_\_\_\_\_  
Date \_\_\_\_\_