

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Colleen Carol Casey

SUBJECT: VOIDED APPLICATION

Control Number: 316762

Applicant: Maie S. Brodsky, M.D., P.C.

License Number: 21-32220-01

Docket Number: 030-35251

Date Voided: 3/6/08

Reason for Void: Licensee needed time to prepare response -
please re-activate upon receipt of written response.

Colleen Carol Casey 3/6/08
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: _____