

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Colleen Card Casey

SUBJECT: VOIDED APPLICATION

Control Number: 317052

Applicant: The Community Hospital

License Number: 13-15882-01

Docket Number: 030-09964

Date Voided: 6/2/08

Reason for Void: The action was combined into 316937  
for the sake of licensing economy.

Colleen Card Casey 6/2/08  
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: \_\_\_\_\_