

: (FOR LFMS USE)
 : INFORMATION FROM LTS
 : -----
 :
 :
 : Program Code: 03121
 : Status Code: 0
 : Fee Category: 3P
 : Exp. Date: 20141130
 : Fee Comments: _____
 : Decom Fin Assur Req'd: N
 : ::

BETWEEN:
 License Fee Management Branch, ARM
 and
 Regional Licensing Sections

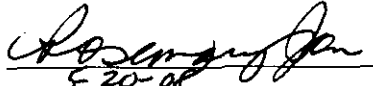
LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED
 Applicant/Licensee: G2 CONSULTING GROUP, LLC
 Received Date: 20080520
 Docket No: 3033590
 Control No.: 317169
 License No.: 21-26593-01
 Action Type: Amendment

2. FEE ATTACHED
 Amount: _____
 Check No.:

3. COMMENTS

Signed 
 Date 5-20-08

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 _____