VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Colleen Carol Casey

SUBJECT: VOIDED APPLICATION

Control Number: 317060

Applicant: JASPER COUNTY HOSPITAL

License Number: 13-26527-01

Docket Number: 030-33299

Date Voided: 7/1/08

Reason for Void: No amendment to the license was needed as 10CFR 30.4 was revised Oct '07 to include NARM as BPM, I called Julie Lusch on 7/1/08 to advise her of this. @ 3:43pm.

Colleen Carol Casey 7/1/08

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: _____

_____