

VOID SHEET

TO: License Fee Management Branch

FROM: RIII

SUBJECT: VOIDED APPLICATION

Control Number: 398913
 Applicant: Woodland Medical Group
 License Number: 21-13255-01
 Docket Number: 030-02149
 Date Voided: May 13, 1996

Renewal voided due to new extension rule. Voided before review.
Refund due.

[Signature] _____ Date: 5/13/96

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 A/82
 Processed by: SAC
5/16/96

140164

9606140270 960513
 PDR ADDCK 03002149
 C PDR

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**UNITED STATES
NUCLEAR REGULATORY COMMISSION**

REGION III
801 WARRENVILLE ROAD
LISLE, ILLINOIS 60532-4351

MAY 13, 1996

NOTE TO LICENSEES WHO SEND IN RENEWAL PACKAGES

On January 16, 1996, the Nuclear Regulatory Commission (NRC) amended its regulations in 10 CFR 30, 40, and 70 to extend the expiration date of qualified byproduct, source and special nuclear material licenses by five years (61 FR 1109). Your license was extended by this rulemaking and you will soon receive a letter notifying you of this. If a refund is due, this will be handled by the License Fee and Accounts Receivable Branch in our headquarters office. Because of this extension, your renewal package is being returned to you.

Please note that if there are elements within your renewal package that need to be incorporated into your license, you must submit a request for an amendment along with the appropriate fee.

If you have any questions please contact the Region III office at (708) 829-9887.

Thank You - Region III

**DIVISION OF ACCOUNTING AND FINANCE
REQUEST FOR REFUND TO EMPLOYEE/VENDOR**

THE EMPLOYEE/VENDOR IDENTIFIED BELOW HAS OVERPAID THE NUCLEAR REGULATORY COMMISSION FOR GOODS AND/OR SERVICES PROVIDED AND IS DUE A REFUND

EMPLOYEE/VENDOR/PAYEE CODE: 211325501 L

NAME: Woodland Medical Center

ADDRESS: Attn: Dr. Harold Daitch

ADDRESS: 22341 W. Eight Mile Road

CITY: Detroit STATE: MI ZIP: 48219

TRANS CODE: PX

TRANS TYPE: FE FUND: X5280 JOB CODE: MATU AMOUNT: \$1400⁰⁰

TRANS TYPE: IR FUND: R1435 JOB CODE: INTR AMOUNT:

TRANS TYPE: IR FUND: R1099 JOB CODE: ADCH AMOUNT:

TRANS TYPE: IR FUND: R1099 JOB CODE: FINE AMOUNT:

TOTAL REFUND AMOUNT: \$1400⁰⁰

COMMENTS: Ac 21-13255-01 Kind Per Request
CK 61839 Attn: Dr. Harold Daitch
(limit comments to 40 characters, including spaces)

PREPARED BY: Shirley Cutchfield DATE: May 17, 1996

AUTHORIZED BY: Jordan Kimberly DATE: 5/21/96

ORIGINAL INV. NO: DATE PAID: AMOUNT:

REFUND ENTERED INTO COLLECT BY:

REFUND DETERMINED BY: DATE:

Dtd. 7/19/95
K. 61839 \$1400 7C REN
MI 21 III 398913
PLEASE ATTACH APPROPRIATE SUPPORTING DOCUMENTATION