|  | : (FOR LFMS USE)<br>: INFORMATION FROM LTS  |
|--|---|
| BETWEEN:   | :   |
| License Fee Management Branch, ARM and Regional Licensing Sections   | Program Code: 02121 Status Code: 0 Fee Category: 7C Exp. Date: 20140930 Fee Comments: Decom Fin Assur Reqd: N |
| LICENSE FEE TRANSMITTAL  |   |
| A. REGION  |   |
| 1. APPLICATION ATTACHED Applicant/Licensee: NOVI CARDIOLOGY Received Date: 20080820 Docket No: 3036661 Control No.: 317409 License No.: 21-32536-01 Action Type: Termination | REAL ESTATE, L.L.C.   |
| 2. FEE ATTACHED Amount: Check No.:   |   |
| 3. COMMENTS  Signed Date   | Cosens Jan  |
| B. LICENSE FEE MANAGEMENT BRANCH (Check  | when milestone 03 is entered /_/)   |
| 1. Fee Category and Amount:  |   |
| 2. Correct Fee Paid. Application may b Amendment Renewal License   | e processed for:  |
| 3. OTHER   |   |
| Signed   |   |