

**Void Sheet**

TO: License Fee Management Branch  
FROM: Region 3  
SUBJECT: VOIDED APPLICATION

Control Number: 317529

Applicant: Gateway Cardiology, P.C.

License Number: 24-32202-01

Docket Number: 030-35167

Date Voided: November 20, 2008

Reason for Void: This amendment request to change address has already been completed in Amendment 7. VOID REQUEST.

*W.P. Reichhold*  
W.P. Reichhold                      November 20, 2008  
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: \_\_\_\_\_