	4	: (FOR LFMS USE) : INFORMATION FROM LTS
BE1	CWEEN:	
License Fee Management Branch, ARM and Regional Licensing Sections		: Program Code: 02120 : Status Code: 0 : Fee Category: 7C
Reg	Jonar Dicensing Sections	Exp. Date: 20101130 : Fee Comments: : Decom Fin Assur Reqd: N
LIC	CENSE FEE TRANSMITTAL	
Α.	REGION	
1.	APPLICATION ATTACHED Applicant/Licensee: KIRKSVILLE MISSOURI HOSPITAL, CO.LLC Received Date: 20081208 Docket No: 3002332 Control No.: 317747 License No.: 24-05245-01 Action Type: Amendment	
2.	FEE ATTACHED Amount: Check No.:	
3.	COMMENTS Signed Date	Cosenius Jan
В.	LICENSE FEE MANAGEMENT BRANCH (Check v	when milestone 03 is entered //)
1.	. Fee Category and Amount:	
2.	Correct Fee Paid. Application may be Amendment Enewal License	e processed for:
3.	OTHER	
	Signed Date	