

(FOR LFMS USE)  
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

:  
:  
:  
:  
: Program Code: 03244  
: Status Code: 3  
: Fee Category: \_\_\_\_\_  
: Exp. Date: 0  
: Fee Comments: \_\_\_\_\_  
: Decom Fin Assur Req'd: \_\_\_\_\_  
:.....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: SIEMENS HEALTHCARE DIAGNOSTICS  
Received Date: 20080922  
Docket No: 3037841  
Control No.: 317499  
License No.: \_\_\_\_\_  
Action Type: New Licensee

2. FEE ATTACHED

Amount: \$4,600 Electronically transferred per letter  
Check No.: \_\_\_\_\_

3. COMMENTS

Signed \_\_\_\_\_  
Date 9-25-00

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /\_/)

1. Fee Category and Amount: \_\_\_\_\_

2. Correct Fee Paid. Application may be processed for:

Amendment \_\_\_\_\_  
Renewal \_\_\_\_\_  
License \_\_\_\_\_

3. OTHER \_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_  
Date \_\_\_\_\_