VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Colleen Carol Casey

SUBJECT: VOIDED APPLICATION

Control Number: 317838

Applicant: Medical Imaging, Inc.

License Number: 24-24423-01

Docket Number: 030-18630

Date Voided: 4/13/09

Reason for Void: No amendment is needed, NARM is already covered by the license + regulations. Fax sent to RSO on 4/13/09.

Colleen Carol Casey 4/13/09

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: _____