

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Colleen Carol Casey

SUBJECT: VOIDED APPLICATION

Control Number:

318103

Applicant:

Mount Clemens Reg. Med Center

License Number:

21-04080-01

Docket Number:

030-02040

Date Voided:

JUNE 12, 2009

Reason for Void:

This is a response to open pending case 318070. It was mistakenly controlled in as a new amendment. I will combine it into 318070 now.

Colleen Carol Casey
Signature

6/12/09
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: _____