

**Void Sheet**

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

Control Number: 318224

Applicant: Medical Group of Fort Wayne, d/b/a Heart Center/Medical Group, Lutheran Medical Park

License Number: 13-32106-01

Docket Number: 03034778

Date Voided: August 3, 2009

Reason for Void: The licensee appears to want an ownership/change of control, however, they did not submit the ownership/change of control information required by Appendix F in NUREG-1556, Volume 15. Request voided at this time because of too much missing information to do a review for an amendment to the license. Sent licensee a copy Appendix F change of ownership/change of control information.

*W. P. Reichhold*  
*W.P. Reichhold*                      **August 3, 2009**  
\_\_\_\_\_  
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: \_\_\_\_\_