VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Colleen Carol Casey

SUBJECT: VOIDED APPLICATION

Control Number: 318512

Applicant: Associated Veterinary Specialists

License Number: 24-26584-01

Docket Number: 030-33561

Date Voided: JAN. 25, 2010

Reason for Void: The licensees application was too deficient to complete processing. Deficiencies sent in letter this date. Re-activate upon receipt of written response.

Colleen Carol Casey 1/25/2010

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: _____