

Void Sheet

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

Control Number: 573017

Applicant: Advanced Virtual Radiology

License Number: 21-32618-01

Docket Number: 030-37194

Date Voided: August 13, 2010

Reason for Void: This amendment was submitted by a radiologist other than the owner/use/Radiation Safety Officer of the license. There appears to be disharmony between the licensee and one of the cardiologists at a location of use listed on the license. I discussed this amendment request with the Radiation Safety Officer listed on the license and he stated we should void the request. OK to void this request.

W. P. REICHHOLD
W.P. Reichhold

Signature

August 13, 2010

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: _____