## VOID SHEFT

TO: License Fee Management Branch

RIII - Colleen Carol Casey FROM:

SUBJECT: **VOIDED APPLICATION** 

Control Number:

Applicant:

License Number:

Docket Number:

Date Voided:

Stilf revised app Reason for Void: be completely processed. iciences an oild response. a write av

Signature

030-17798

970

9500-01

Engineering Internation

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 \_\_\_\_\_

Date<sup>-</sup>

Processed by: