Void Sheet

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

Control Number: 576006

Applicant: Northwest Cardiology, PC

License Number: 21-32616-01

Docket Number: 030-37190

Date Voided: September 27, 2011

Reason for Void: The licensee requested a change of ownership, however, unable to make the change at this time because it is to occur in the future. Sent the licensee a "consent" letter and licensee to follow-up in 30 days after ownership change has occurred with change of ownership information.

W.P. REICHHOND *WIP. Reichhold*_____September 27, 2011_____

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: _____