

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Colleen Carol Casey

SUBJECT: VOIDED APPLICATION

Control Number: 576884

Applicant: ELKHART CLINIC

License Number: 13 - 32515-01

Docket Number: 030 - 36581

Date Voided: APRIL 27, 2012

Reason for Void: The license has decided to not terminate its license at all and will be sending in an amendment adding authorization to license very soon.

Colleen Carol Casey 4/27/2012
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: _____