

Void Sheet

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

Control Number: 577808

Applicant: Marquette General Health System

License Number: 21-05432-04

Docket Number: 030-18133

Date Voided: August 14, 2012

Reason for Void: The licensee requested a change of control/ownership, however, the change is scheduled for September 2012. Unable to change the control/ownership until it occurs. Consent letter for change of ownership was sent to licensee with request for follow-up after the change of ownership/control occurs in September 2012.

<i>W. P. REICHHOLD</i>	
<u>W.P. Reichhold</u>	<u>8/14/2012</u>
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: _____