Void Sheet

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

Control Number: 578145

Applicant: Pharmacia & Upjohn Company

License Number: 21-00182-03

Docket Number: 030-04781

Date Voided: September 26, 2012

Reason for Void: This is a request for an ownership/control change however, unable to amendment the license until the actual change in ownership/control on or about October 1, 2012, (licensee is unsure as to the exact date at this time). Issued a "consent" letter to the licensee for transfer of ownership/control with a request that they follow-up with an amendment in 30 days after the transfer has occurred. Also reminded the licensee they need to update their decommissioning financial assurance instruments with new name of company.

W.P. REECHHOND W19. Reichhold 9/26/2012 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: