COD SHIFT

TO: License Fee Mana	gement Branch	
FROM: RIII - RWM	Null	
SUBJECT: VOIDED APPL	LICATION	
Control Number:	576567	
Applicant:	Cardned Health.	
License Number:	34-32280-01	
Docket Number:	. 030-38222	
Date Voided:	16/30/12	
Reason for Void: 12 / Christ Lui	Figured Assirume for	
	Signature 16/30/1.	- CDate
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 his	