

Void Sheet

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

Control Number: 579591

Applicant: Cardiology Consultants of St. Louis

License Number: 24-32760-01

Docket Number: 030-38105

Date Voided: December 21, 2012

Reason for Void: This request has been combined with Control number 579594, which is a request for ownership change for the same licensee.

W. P. Reichhold
W.P. Reichhold 12/21/2012
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: _____