

VOID SHEET

License Fee Management Branch

REGION I

ACT: VOIDED APPLICATION

Application Number: 111029

Applicant: VA MEDICAL CENTER

Voided: 8 AUG 1989

Reason for Void: ACTION WAS COMPLETED UNDER
MAIL CONTROL 110855.

EMW
Signature

8-8-89
Date

Comments:
Official Record Copy of
Voided Action

MB USE ONLY

Review of VOID Completed:
Refund Authorized and processed
No Refund Due
Fee Exempt or Fee Not Required

Notes: _____

Log completed _____
Processed by: _____

0124 890808
IC30
09-01 PDR

OFFICIAL RECORD COPY ML 10

11

VOID SHEET

TO: License Fee Management Branch

FROM: REGION I

SUBJECT: VOIDED APPLICATION

Control Number: 111029

Applicant: VA MEDICAL CENTER

Date Voided: 8 AUG 1989

Reason for Void: ACTION WAS COMPLETED UNDER
MAIL CONTROL 110855.

EMW
Signature

8-8-89
Date

Attachment:
Official Record Copy of
Voided Action

FOR LFMB USE ONLY

- Final Review of VOID Completed:
- Refund Authorized and processed
- No Refund Due
- Fee Exempt or Fee Not Required

Comments: _____

Log completed _____
Processed by: _____

B912060124 B90808
REG1 LIC30
37-10509-01 PDR

OFFICIAL RECORD COPY ML 10

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(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM
AND
REGIONAL LICENSING SECTIONS

PROGRAM CODE: 02120
STATUS CODE: 0
FEE CATEGORY: EX 7C
EXP. DATE: 19910531
FEE COMMENTS:

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

APPLICANT/LICENSEE: V. A. MEDICAL CTR.
RECEIVED DATE: 890712
DOCKET NO: 3003127
CONTROL NO.: 111029
LICENSE NO.: 37-10509-01
ACTION TYPE: AMENDMENT

2. FEE ATTACHED

AMOUNT: ~~-----~~
CHECK NO.: ~~-----~~

3. COMMENTS

SIGNED E.M.D
DATE 7-18-89

B. LICENSE FEE MANAGEMENT BRANCH (CHECK WHEN MILESTONE 03 IS ENTERED /__ /)

1. FEE CATEGORY AND AMOUNT: -----

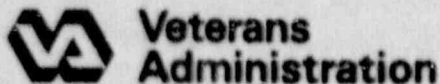
2. CORRECT FEE PAID. APPLICATION MAY BE PROCESSED FOR:
AMENDMENT -----
RENEWAL -----
LICENSE -----

3. OTHER -----

SIGNED -----
DATE -----

175-10
7-18-89

030-03127



June 26, 1989

In Reply Refer To: 542/115

James W. Fletcher, M.D.
Director Nuclear Medicine Service (115)
V. A. Central Office
810 Vermont Avenue, N.W.
Washington, DC 20420

SUBJECT: License #37-10509-01 - Request for Relocation

Following your review of the enclosed letter (and 2 copies) to the NRC, please forward to King of Prussia, PA.

If there are any questions, please contact Dr. Robert L. Bell, Chief, Nuclear Medicine Service at FTS 489-7291 or 215-384-7711.

R. C. MEILER
Medical Center Director

Enclosures

7/5/89

JAMES W. FLETCHER, M.D.
Director, Nuclear Medicine Service (115)
Veterans Administration
Washington, DC 20420

FEE EXEMPT

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"America is #1—Thanks to our Veterans"

111029

JUL 12 1989