VOID SHEET

VE 7.6.22 I 7C 110288

TO: License Fee Management Branch

FROM: REGION I

SUBJECT: VOIDED APPLICATION

Control Number: 110288

Applicant: HOSPITAL CTR AT ORANGE

Date Voided: 3-7-89

Reason for Void: WRONG LICENSE # 29-03038-01 SHOULD BE 29-03038-02.

Signature 3-7-89 Date

Attachment:
Official Record Copy of
Voided Action

FOR LFMB USE ONLY

Final Review of VOID Completed:

9004090314 890307
REG1 LIC30
MATLSLICENSING PDR

Refund Authorized and processed

No Refund Due

Fee Exempt or Fee Not Required

Comments:

Log completed
Processed by:

OFFICIAL RECORD COPY ML 10

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM
AND
REGIONAL LICENSING SECTIONS

(FOR LFMS USE)
INFORMATION FROM LTS

PROGRAM CODE: 02120
STATUS CODE: 0
FEE CATEGORY: 7C
EXP. DATE: 19900831
FEE COMMENTS: ----------

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED
   APPLICANT/LICENSEE: HOSPITAL CTR. AT ORANGE
   RECEIVED DATE: 890215
   DOCKET NO: 3002464
   CONTROL NO.: 110288
   LICENSE NO.: 29-03038-01
   ACTION TYPE: AMENDMENT

To RI for Voiding. This is a Hearing for the -02 license, Docket no. 03000347.
S.K.

2. FEE ATTACHED
   AMOUNT: ~~$0~~
   CHECK NO.: ~~0~~

3. COMMENTS

SIGNED EGMW
DATE 2-21-89

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

1. FEE CATEGORY AND AMOUNT: 7C

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

3. OTHER ----------

SIGNED S.K.
DATE 2-21-89


2
IMAGE EVALUATION
TEST TARGET (MT-3)
1.0
1.1
1.25
1.4
1.6
150mm
6
PHOTOGRAPHIC SCIENCES CORPORATION