VOID SHEET

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FROM:	Region				
SUBJECT:	VOIDED APPLI	ICATION			
Control Num	ber:/	66.51			
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Date Voided		3/13/94			
Reason for	Void:				
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(FOR LFMS USE)
INFORMATION FROM LTS BETWEEN: PROGRAM CODE: 02120
STATUS CODE: 0
FEE CATEGORY: EX 7C
EXP. DATE: 19940430
FEE COMMENTS: V
DECOM FIN ASSUR REQD: Y LICENSE FEE MANAGEMENT BRANCH, ARM REGIONAL LICENSING SECTIONS LICENSE FEE TRANSMITTAL A. REGION APPLICATION ATTACHED APPLICANT/LICENSSE: RECEIVED DATE: DOCKET NO: CONTROL NO.: LICENSE NO.: ACTION TYPE: V. A. HOSPITAL 940317 3002638 39648 34-007 2-03 AMENDME (2. FEE ATTACHED AMOUNT: CHECK NO. 1 3. COMMENTS 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

SIGNED

3. OTHER



DEPARTMENT OF VETERANS AFFAIRS Medical Center 3200 Vine Street Cincinnati OH 45220

in Reply Refer To: 539/115

February 16, 1994

Materials Licensing Section U.S. Nuclear Regulatory Commission Region III 799 Roosevelt Road Glen Ellyn, Il 60137

Subject: NRC License Amendment

We wish to amend byproduct material license number 34-00799-03.

Please add chromium 51 to be used for research and development. We wish to possess up to 50 millicuries of chromium 51 for this purpose in any chemical and/or physical form.

If you have any questions, please contact Kenneth M. Fritz, Radiation Safety Officer, at (513) 559-5632.

FEE EXEMPT

John To Carson

Medical Center Director

RECEIVED

MAR 1 7 1994 DECTON IN

REGION III

CONTROL NO. 396651

MAR 1 7 1994

CONVERSA ON RECORD

8:00 A.M. 3/23/94

O VISIT O CONFERENCE

X TELEPHONE

O INCOMING X OUTGOING

NAME OF PERSON(S) CONTACTED OR IN CONTACT

ORGANIZATION (OFFICE, DEPT.ETC.)

TELEPHONE NO.

Ken Fritz

VA Med. Center

513-559-5632

SUBJECT

Licensee's letter dated 2/16/94

SUMMARY

Informed Mr. Fritz that amendment no. 32 authorizes chromium-51, up to 100 millicuries, for R&D. Therefore, licensee's letter dated 2/16/94 which requests 50 millicurie of chromium-51 for R&D can be deleted. Mr. Fritz agreed.

TION REQUIRED

id C/N 96651

NAME OF PERSON DOCUMENTING CONVERSATION

Kevin G. Null

SIGNATURE

ACTION TAKEN

SIGNATURE

TITLE

DATE