

JAN 14 1994

License No. 37-28331-01  
Docket No. 030-30947  
Control No. 119079

Advacare Management Services, Inc.  
ATTN: Robert L. Perry  
General Manager  
2 Bala Plaza, Suite IL 52  
Bala Cynwyd, Pennsylvania 19004

Dear Mr. Perry:

Please review the enclosed document carefully and be sure that you understand all conditions. If there are any errors or questions, please notify the U.S. Nuclear Regulatory Commission, Region I office, the Licensing Assistance Section, (610) 337-5093 or 5239, so that we can provide appropriate corrections and answers.

Your license has been issued in the name of an institution, please ensure that all license amendment or renewal requests are signed by a representative of the institution's management. This will assure that management has concurred with all commitments.

Please be advised that your license expires at the end of the day, in the month, and year stated in the license. Until your license is terminated, you must conduct your program involving byproduct materials in accordance with the conditions of your NRC license, representations made in your license application, and NRC regulations. In particular, note that you must:

1. Operate in accordance with NRC regulations 10 CFR Part 19, "Notices, Instructions and Reports to Workers; Inspections," 10 CFR Part 20, "Standards for Protection Against Radiation," and other applicable regulations.
2. Not possess and use materials authorized in Items 6, 7, and 8, on the license until:
  - a. you have constructed the facilities and obtained the equipment described in the license application and supporting documentation; and
  - b. you have notified the U.S. Nuclear Regulatory Commission, Region I, ATTN: Chief, Nuclear Materials Safety Branch, 475 Allendale Road, King of Prussia, Pennsylvania 19406 in writing, that activities authorized by the license will be initiated.

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3. Notify NRC, in writing, within 30 days:
  - a. when an authorized user, Radiation Safety Officer, Teletherapy Physicist, or Medical Physicist permanently discontinues performance of duties under the license or has a name change; or
  - b. when the licensee's mailing address changes (no fee is required if the location of byproduct material remains the same).
4. In accordance with 10 CFR 30.36(b) and/or license condition, notify NRC, promptly, in writing, and request termination of the license:
  - a. when you decide to terminate all activities involving materials authorized under the license; or
  - b. if you decide not to complete the facility, acquire equipment, or possess and use authorized material.
5. Request and obtain a license amendment before you:
  - a. receive or use byproduct material for a clinical procedure permitted under Part 35 but not permitted by your license issued pursuant to this Part;
  - b. permit anyone, except a visiting authorized user described in 10 CFR 35.27, to work as an authorized user under the license;
  - c. change Radiation Safety Officers, Teletherapy Physicists or Medical Physicists;
  - d. order byproduct material in excess of the amount, or radionuclide, or form different than authorized on the license;
  - e. add or change the areas of use or address or addresses of use identified in the license application or on the license; or
  - f. change ownership of your organization.
6. Submit a complete renewal application with proper fee or termination request at least 30 days before the expiration date of your license. You will receive a reminder notice approximately 90 days before the expiration date. Possession of byproduct material after your license expires is a violation of NRC regulations. A license will not normally be renewed, except on a case-by-case basis, in instances where licensed material has never been possessed or used.

In addition, please note that NRC Form 313 requires the applicant, by his/her signature, to verify that the applicant understands that all statements contained in the application are true and correct to the best of the applicant's knowledge. The signatory for the application should be the licensee or certifying official rather than a consultant.

You will be periodically inspected by the NRC. Failure to conduct your program in accordance with NRC regulations, license conditions, and representations made in your license application and supplemental correspondence with NRC will result in enforcement action against you. This could include issuance of a notice of violation, or imposition of a civil penalty, or an order suspending, modifying or revoking your license as specified in the General Policy and Procedures for NRC Enforcement Actions, 10 CFR Part 2, Appendix C. Since serious consequences to employees and the public can result from failure to comply with NRC requirements, prompt and vigorous enforcement actions will be taken when dealing with licensees who do not achieve the necessary meticulous attention to detail and the high standard of compliance which NRC expects of its licensees.

Thank you for your cooperation.

Sincerely,

Original Signed By:  
Michelle Beardsley

Michelle R. Beardsley  
Nuclear Materials Safety Branch  
Division of Radiation Safety  
and Safeguards

Enclosures:

1. Amendment No. 10
2. Requirements for Materials Licensees

DRSS:RI *MB*  
Beardsley/gc

1/ *3*/94



Bala Pointe, Suite 109  
111 Presidential Boulevard  
Bala Cynwyd, PA 19004  
215 668 8152  
FAX 215 668 9850

December 22, 1993

Michelle Beardsley  
Nuclear Materials Safety Section  
Division of Safety and Safeguard  
U.S.N.R.C. - Region I  
475 Allendale Road  
King of Prussia, PA 19406

030-30947  
37-28331-01

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info  
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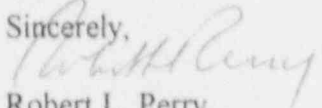
Re: Control #119079

Dear Ms. Beardsley,

This letter is in reference to your response to Walter Robinson Associates concerning my letter, to you, dated 12/21/19. In order to be in compliance with the regulations and requirements of the N.R.C., we will do as follows: Our Radiation Safety Officer, Wayne Arnold, D.O., will be sub-delegating on-site quarterly management audit inspections (during daytime hours), safety and regulatory in-services and training, review of personnel monitoring and written confirmation to Walter Robinson and Associates, who we have contracted to visit each of our licensed locations on a quarterly basis. Dr. Arnold will sign the 10CFR 35 and Reg. Guide 10.8 required documents on a quarterly or monthly basis as is required by each document. This is in line with his duties as R.S.O.

I hope this meets with the requirements of the N.R.C. If there are any additional concerns, please call Walter Robinson or me.

Thank you for your attention and your helpful advice with this matter. Have a happy holiday!

Sincerely,  
  
Robert L. Perry  
General Manager

AdvaCare/ImageAmerica

119079  
DEC 27 1993

MS 16  
J-1



Bala Pointe, Suite 109  
111 Presidential Boulevard  
Bala Cynwyd, PA 19004  
215 668 8152  
FAX 215 668 9850

December 21, 1993

Michelle Beardsley  
Nuclear Materials Safety Section  
Division of Safety and Safeguard  
U.S.N.R.C. - Region I  
475 Allendale Road  
King of Prussia, PA 19406

Re: Control #119079

Dear Ms. Beardsley,

With reference to your control number above we wish to submit the following supplemental material in support of our recent NRC License #37-28331-01, amendment request.

1. Please find our diagram with exterior adjacent rooms designated as per your request. We will monitor the adjacent walls to our hot lab weekly to assure compliance with 10CFR20 limits.
2. Our Radiation Safety Officer, Wayne Arnold, D.O., will be sub-delegating on-site quarterly management audit inspections (during daytime hours), safety and regulatory in-services and training, review of personnel monitoring and written confirmation to Walter Robinson and Associates, who we have contracted to visit each of our licensed locations on a quarterly basis. They will also sign the 10CFR 35 and Reg. Guide 10.8 required documents. They will be signed for Dr. Arnold, the R.S.O., who takes full responsibility for any errors or omissions for these or any other RSO duty. The quarterly visits by Walter L. Robinson & Associates will be a 6 hour duration and to all sites listed in this license. This arrangement, with the exception of the signatures has been set at one address on 12/17/93.

They will also assist us with quarterly inventories, sealed source leak tests, and some dose calibrator checks, well counter (wipe-testing device, Caprac) periodic tests. They will provide in-service videotapes, regulatory update newsletters and bulletins pertaining to regulatory requirements including an annual review of the radiation safety program as required.

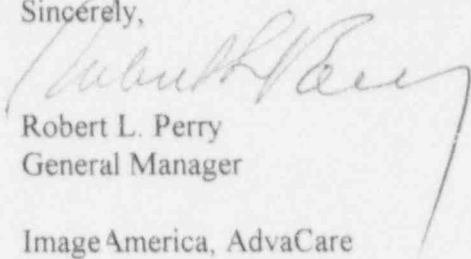
OFFICIAL RECORD COPY, ML 10

119079  
DEC 22 1993  
FAX REC'D 12/21/93

3. I concur with the statements and representations in the earlier letter (12/8/93) pertaining to this amendment (Control #119079).

If you have any questions pertaining to this response please contact our consultant radiation physicist, Walter L. Robinson at 717-291-9813.

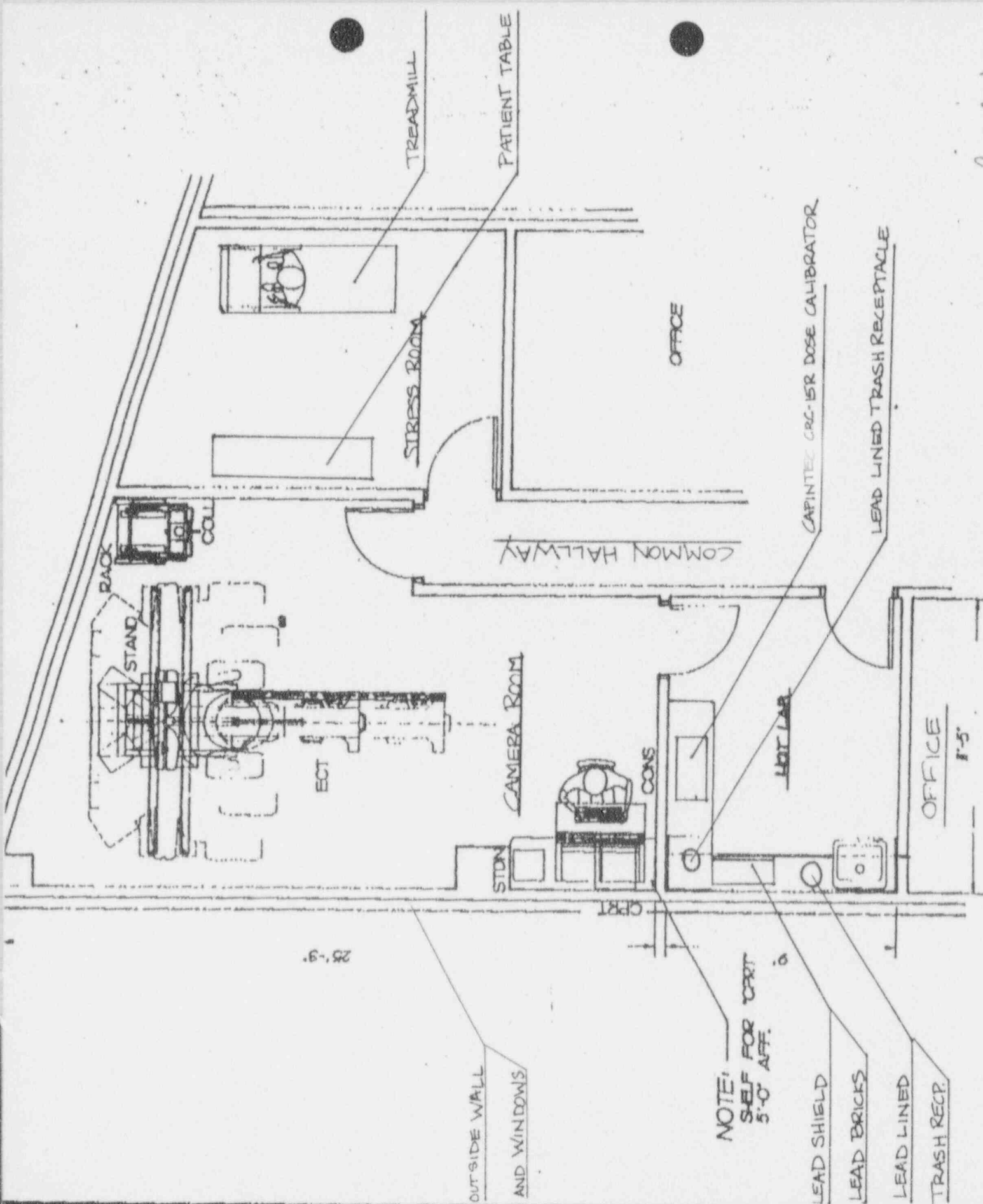
Sincerely,



Robert L. Perry  
General Manager

Image America, AdvaCare

cc: Wayne Arnold, D.O.  
Walter Robinson, Physicist



# NMSB TELEPHONE CONVERSATION RECORD

DATE OF CALL: 7-2-16-93

TIME OF CALL: 11:30 AM

PERSON CALLED: Sandra Young PHONE NO. \_\_\_\_\_  
(Outgoing Call)

PERSON CALLING: Mitchell Beardsley

FACILITY NAME: Adva Care Mgt. Service, Inc.

LICENSE NO.: 37-28331-01

DOCKET NO. 030-30947

SUBJECT:

License amendment

SUMMARY:

I requested the following information to complete license amendment:

- 1.) Indicate all adjacent areas to Hot Lab & Assure levels in these areas comply with 20.105
- 2.) Specify no. of hours & frequency RSO will spend at each site - confirm during work hours to insure interaction with

ACTION REQUIRED/TAKEN:

personnel  
3.) Signature by mgmt!  
Letter

SIGNATURE: MB

MAIL CONTROL NO. 119079

X Follow-up call 12-22-93 10:50 AM. With regard to their response letter dated 12-21-93 Item 2. - the RSO must sign documentation as specified in 100K 35-





December 8, 1993

Bala Pointe, Suite 109  
111 Presidential Boulevard  
Bala Cynwyd, PA 19004  
215 668 8152  
FAX 215 668 9850

Ms. Michelle Beardsley  
Licensing Assistant Section  
Nuclear Materials Safety Branch  
U.S. Nuclear Regulatory Commission, Region 1  
475 Allendale Road  
King of Prussia, PA 194406

030-30947

Re: Amendment to License No. 37-28331-01

Dear Ms. Beardsley,

Please amend the above referenced Byproduct Material License to include an additional place of use. We wish to open a new nuclear medicine facility located at:

7901 Bustleton Avenue  
Philadelphia, PA 19152

It will be on the second floor of this building. A facility diagram is included for your reference. Our radiation safety program at this facility will be identical to the program we have established at the other four (4) facilities. It is described in our initial license application. This includes all byproduct materials listed and the associated possession limits as specified in the above referenced license.

Also enclosed is a Preceptor Statement for Olindo Preli, M.D. whom we wish to add to our license as an Authorized User for Groups I & II, cardiovascular clinical procedures. All of his necessary information is included for your review.

The completion of this new site is on a very tight timeline. We are scheduled to begin operations at this site on January 15, 1994. Therefore, we are asking if our application for this amendment could be handled as expeditiously as possible. We will be most grateful for any effort that can be made on our behalf. For us, at this point, time is of the essence!

Thank you for your kind and prompt consideration in this matter.

Sincerely,

*Sandra J. Young*  
Sandra J. Young  
Operations Manager

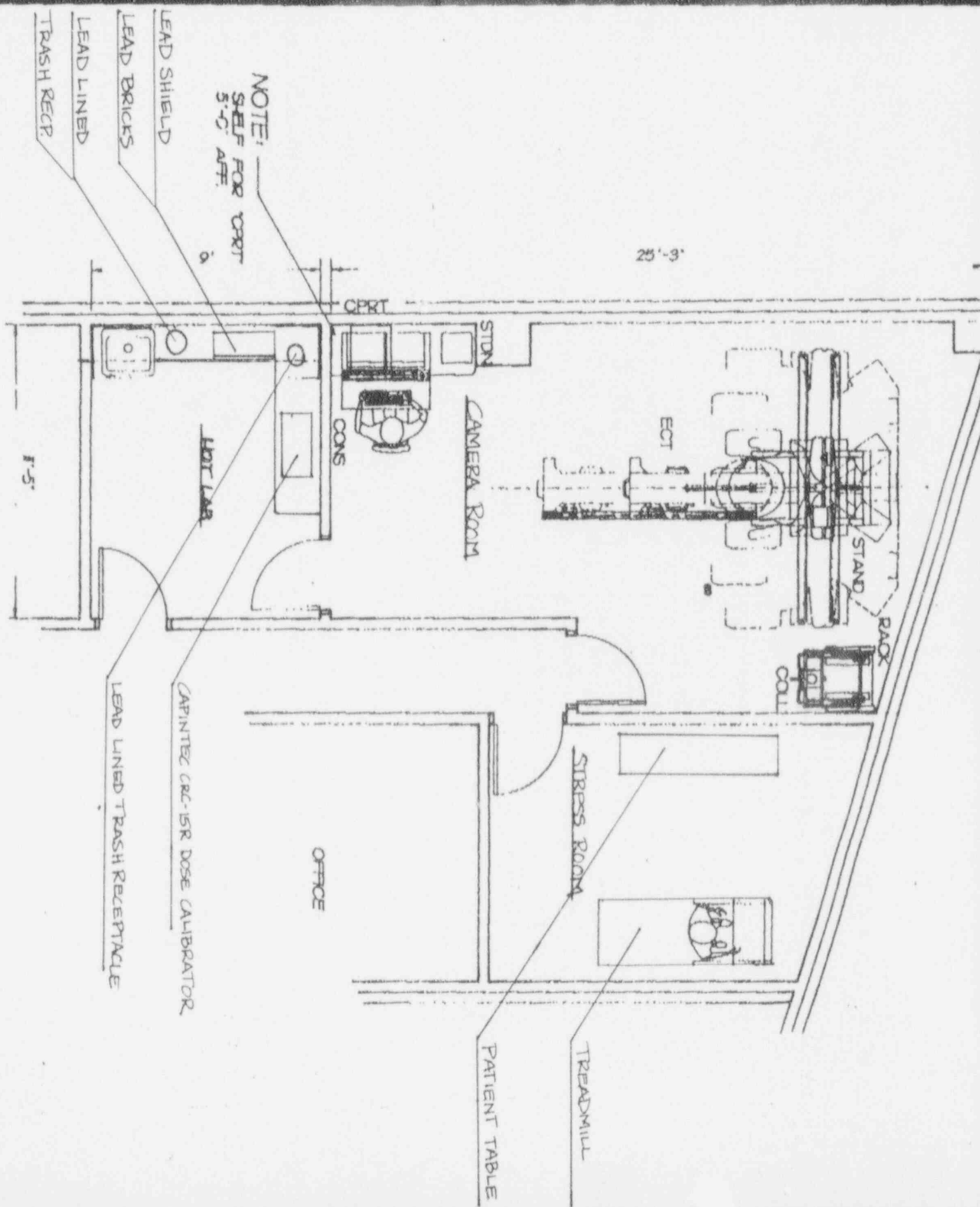
*Bpc 7 I*  
*Advacare Diagnostic*  
*771*  
*1-50*  
*TC*  
*AMD*  
*1/10/93*  
*B-*

cc: Wayne Arnold, D.O., RSO

119079

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HAND DELIVERED DEC 08 1993



## EQUIPMENT LEGEND

CODE NAME	COMPONENT NAME	BTU/HOUR	WEIGHT	WIDTH	INCH DIM. DEPT
COLL	DIGITAL GAMMACAMERA GCA-602A/SA COLLIMATOR EXCHANGE CART	00.00	242.00	26.40	35.8
CONS	DIGITAL GAMMACAMERA GCA-602A/SA OPERATOR CONSOLE	10238.00	506.00	40.90	35.4
ECT	DIGITAL GAMMACAMERA GCA-602A/SA ECT IMAGING COUCH OPTION	00.00	363.00	28.30	81.1
RACK	DIGITAL GAMMACAMERA GCA-602A/SA COLLIMATOR EXCHANGE RACK	00.00	297.00	30.30	31.5
STAND	DIGITAL GAMMACAMERA GCA-602A/SA DETECTOR STAND SUPPORT	3515.00	2680.00	47.20	85.5
STDN	DIGITAL GAMMACAMERA GCA-602A/SA STEPDOWN TRANSFORMER	625.00	160.00	14.00	14.0

# Yale University

Department of Diagnostic Radiology



SCHOOL OF MEDICINE  
333 CEDAR STREET TE-2  
P.O. BOX 3333  
NEW HAVEN, CONNECTICUT 06510

(203) 785-4915 or (203) 785-4114  
Fax (203) 785-7015

FRANS J. TH. WACKERS, M.D.  
Director, Cardiovascular Nuclear Imaging

July 6, 1993

To Whom It May Concern:

This letter is to affirm that Olindo Preli, M.D. gained clinical experience at our institution in nuclear cardiology. The preceptorship began February 17, 1992 and continued through June 4, 1993. During this period, Dr. Preli actively participated in the following procedures:

- 400 Thallium stress-delayed imaging/function procedures
- 100 Thallium rest imaging/function procedures
- 10 PYP/RBC multi-gated acquisition stress procedures
- 200 Ejection fraction calculation procedures
- 200 Wall motion evaluation studies
  - 1 Shunt evaluation calculations
- 200 Tc-Sestamibi SPECT Stress Test
  - 2 Dobutamine Stress Test
  - 20 Persantine Stress Test

During this time Dr. Preli also acquired experience in health physics, radiopharmaceutical preparation, technical and administrative procedures of our facility, as well as general operations as stipulated by our license conditions. Dr. Preli also gained experience in the preparation of radiopharmaceutical kits during this period and eluted the  $^{99m}\text{Tc}/^{99m}\text{Mo}$  generator

The hours of nuclear cardiology clinical and work experience accrued during this period total 500 hours. I believe that Dr. Preli is qualified to perform and interpret MUGA scans, planar, and SPECT nuclear cardiac studies.

Sincerely,

Frans J. Th. Wackers, M.D.  
Professor of Diagnostic Radiology  
and Medicine  
Director, Cardiovascular Nuclear Imaging  
and Exercise Laboratories

FW/icc  
Enc

EXHIBIT 3  
SUPPLEMENT B

SUPPLEMENT		U. S. NUCLEAR REGULATORY COMMISSION	
PRECEPTOR STATEMENT			
<i>Supplement B must be completed by the applicant physician's preceptor. If more than one preceptor is necessary to document experience, obtain a separate statement from each.</i>			
<b>1. PROPOSED PHYSICIAN USER'S NAME AND ADDRESS</b>		<b>KEY TO COLUMN C</b> <b>PERSONAL PARTICIPATION SHOULD CONSIST OF:</b>	
FULL NAME <p align="center">Olindo Preli, MD</p>		1. Supervised examination of patients to determine the suitability for radioisotope diagnosis and/or treatment and recommendation for prescribed dosage.	
STREET ADDRESS <p align="center">700 Jefferson Avenue</p>		2. Collaboration in dose calibration and actual administration of dose to the patient including calculation of the radiation dose, related measurements and plotting of data.	
CITY   STATE   ZIP CODE <p align="center">Scranton   PA   18503</p>		3. Adequate period of training to enable physician to manage radioactive patients and follow patients through diagnosis and/or course of treatment.	
<b>2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN</b>			
ISOTOPE A	CONDITIONS DIAGNOSED OR TREATED B	NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION C	COMMENTS D <i>(Additional information or comments may be submitted in duplicate on separate sheets.)</i>
	Thyroid scan		
	Thyroid uptake		
	Lung perfusion scan		
	Xenon ventilation study		
	Aerosol ventilation scan		
	Renal flow scan		
	Brain scan		
	Liver/spleen scan		
	Bone scan		
	Gastroesophageal study		
	LeYeen shunt study		
	Cystogram		
	Dacryocystogram		
	Cardiac perfusion scan.		
	Cardiac stress ventriculogram		
Cardiac rest ventriculogram		200	
Gallium scan			

PROPOSED PHYSICIAN USER

Olindo Preli, MD


PRECEPTOR STATEMENT (Continued)

2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN (Continued)

ISOTOPE A	CONDITIONS DIAGNOSED OR TREATED B	NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION C	COMMENTS (Additional information or comments may be submitted in duplicate on separate sheets.) D
P-32 (Soluble)	TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES		
P-32 (Colloidal)	INTRACAVITARY TREATMENT		
I-131	TREATMENT OF THYROID CARCINOMA		
	TREATMENT OF HYPERTHYROIDISM		
Au-198	INTRACAVITARY TREATMENT		
Co-60 or Cs-137	INTERSTITIAL TREATMENT		
	INTRACAVITARY TREATMENT		
I-125 or Ir-192	INTERSTITIAL TREATMENT		
	TELE THERAPY TREATMENT		
Cs-60 or Cs-137	TELE THERAPY TREATMENT		
Sr-90	TREATMENT OF EYE DISEASE		
	RADIOPHARMACEUTICAL PREPARATION		
Mo-99/ Tc-99m	GENERATOR	10	
Sr-113/ In-113m	GENERATOR		
Tc-99m	REAGENT KITS		
Other	Tl-201 imaging	500	

3. DATES AND TOTAL NUMBER OF HOURS RECEIVED IN CLINICAL RADIOISOTOPE TRAINING

LOCATION	DATES	CLOCK HOURS OF EXPERIENCE
Yale University Cardiovascular Laboratory	2/17/92 - 4/16/93	500 hours clinical radioisotope training

4. THE TRAINING AND EXPERIENCE INDICATED ABOVE WAS OBTAINED UNDER THE SUPERVISION OF:	5. PRECEPTOR'S SIGNATURE 
a. NAME OF SUPERVISOR Frans J. Th. Wackers, MD	
b. NAME OF INSTITUTION Yale University School of Medicine	7. PRECEPTOR'S NAME (Please type or print) Frans J. Th. Wackers, MD
c. MAILING ADDRESS 333 Cedar St, TE-2	
d. CITY New Haven CT 06510	8. DATE 06/04/93
e. MATERIALS LICENSE NUMBER(S) 06-00183-03	



# American Society of Nuclear Cardiology

9111 Old Georgetown Road Bethesda, Maryland 20814-1699  
(301) 493-2360 FAX (301) 897-9745

July 29, 1993

PRESIDENT  
JEFFREY A. LEPPA, M.D.

PRESIDENT-ELECT  
FRANS J. TH. WACKERS, M.D., Ph.D.

VICE PRESIDENT  
ABDULMASSIH S. ISKANDRIAN, M.D.

SECRETARY  
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KENNETH A. BROWN, M.D.

BOARD OF DIRECTORS  
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LYNNE L. JOHNSON, M.D.  
JENNIFER A. MATTERA, C.N.M.T.  
HEINRICH R. SCHELBERT, M.D., Ph.D.

Dr. Olindo J. Preli  
Mercy Hospital  
746 Jefferson Avenue  
Scranto., PA 18510

Dear Dr. Preli:

On behalf of the Board of Directors and the Executive Committee, I take pleasure in welcoming you to membership in the American Society of Nuclear Cardiology. Your name has been entered on the roster as a "Founding Member" of ASNC.

Enclosed is a lapel pin signifying your membership; we will mail your Certificate of Membership at a later date.

Please call on us at any time for whatever help we may be able to give you. Your interest in and suggestions for the Society are always welcome.

Sincerely,

Abdulmassih S. Iskandrian, M.D.  
Vice President and  
Chairman, Membership Committee

ASI:jhc

Enclosure

# NUCLEAR MEDICAL EDUCATION PROGRAM

## Affidavit of Academic Completion and Competency

*This document is to attest that*

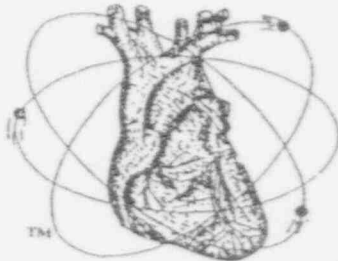
OLINDO PRELI, M.D.

*has successfully completed the didactic program*

### MEDICAL RADIATION PROTECTION

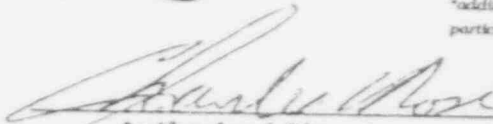
*and has provided evidence of attendance in this program and evidence of achieving the objectives of this program through examination.*

*This program provides the following levels of accomplishment:*



- 50 Didactic Instructional Hours (DIH)  
(In compliance with 10CFR35)
- 5 Continuing Education Units (CEU)
- 50 Continuing Medical Education (CME)
- 50 Technical/Professional Credit specified by the American Pharmaceutical Association and the American Association of Health Physicists\*

\*additional documentation will be provided to Regulatory Agencies upon participant request

  
Authorized Signature

189309  
Affidavit of Competency

17 OCTOBER 1992  
Date Class Commenced

## INSTITUTE FOR NUCLEAR MEDICAL EDUCATION

5785 Arapahoe, Suite D, Boulder, CO 80303 800-548-4024

Certified as an Approved Educational Institution by the Department of Higher Education, State of Colorado. Validated by the Accrediting Commission of the Accrediting Council for Continuing Education Training, a national accrediting agency listed by the US Secretary of Education. Validated by the American Council on Education, recognized by the American Association for Collegiate Registrars, Council on Post-Secondary Education.



# NUCLEAR MEDICAL EDUCATION PROGRAM

## Affidavit of Academic Completion and Competency

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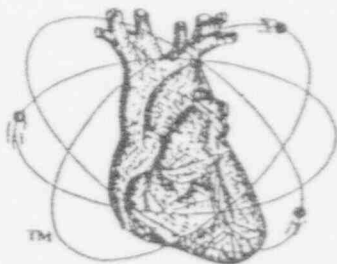
OLINDO PRELI, M.D.

*has successfully completed the didactic program*

### MEDICAL RADIATION INSTRUMENTATION

*and has provided evidence of attendance in this program and evidence of achieving the objectives of this program through examination.*


*This program provides the following levels of accomplishment:*



- 50 Didactic Instructional Hours (DIH)  
(In compliance with 10CFR35)
- 5 Continuing Education Units (CEU)
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\*additional documentation will be provided to Regulatory Agencies upon participant request

23 SEPTEMBER 1992  
Date Class Commenced

  
Authorized Signature

078224  
Affadavit of Competency

## INSTITUTE FOR NUCLEAR MEDICAL EDUCATION

5785 Arapahoe, Suite D, Boulder, CO 80303 800-548-4024

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# NUCLEAR MEDICAL EDUCATION PROGRAM

## Affidavit of Academic Completion and Competency

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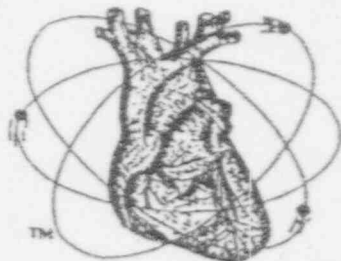
OLINDO PRELI, M.D.

*has successfully completed the didactic program*

### PRINCIPLES OF RADIATION PHYSICS

*and has provided evidence of attendance in this program and evidence of achieving the objectives of this program through examination.*

*This program provides the following levels of accomplishment:*



- 50 Didactic Instructional Hours (DIH)  
(In compliance with 10CFR35)
- 5 Continuing Education Units (CEU)
- 50 Continuing Medical Education (CME)
- 50 Technical/Professional Credit specified by the American Pharmaceutical Association and the American Association of Health Physicists\*

\*additional documentation will be provided to Regulatory Agencies upon participant request



19 SEPTEMBER 1992  
Date Class Commenced

Authorized Signature

078223

Affidavit of Competency

## INSTITUTE FOR NUCLEAR MEDICAL EDUCATION

5785 Arapahoe, Suite D, Boulder, CO 80303 300-548-4024

Certified as an Approved Educational Institution by the Department of Higher Education, State of Colorado. Validated by the Accrediting Commission of the Accrediting Council for Continuing Education Training, a national accrediting agency listed by the US Secretary of Education. Validated by the American Council on Education, recognized by the American Association for Collegiate Registrars, Council on Post-Secondary Education.

# NUCLEAR MEDICAL EDUCATION PROGRAM

## Affidavit of Academic Completion and Competency

*This document is to attest that*

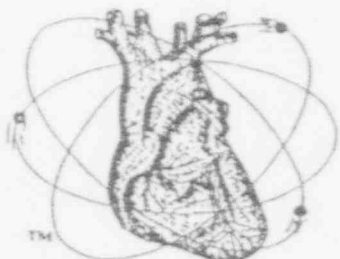
OLINDO PRELI, M.D.

*has successfully completed the didactic program*

### RADIOPHARMACEUTICALS AND CHEMISTRY

*and has provided evidence of attendance in this program and evidence of achieving the objectives of this program through examination.*

*This program provides the following levels of accomplishment:*




- 50 Didactic Instructional Hours (DIH)  
(In compliance with 10CFR35)
- 5 Continuing Education Units (CEU)
- 50 Continuing Medical Education (CME)
- 50 Technical/Professional Credit specified by the American Pharmaceutical Association and the American Association of Health Physicists\*

\*additional documentation will be provided to Regulatory Agencies upon participant request

21 OCTOBER 1992

Date Class Commenced

  
Authorized Signature

189310

Affidavit of Competency

## INSTITUTE FOR NUCLEAR MEDICAL EDUCATION

5785 Arapahoe, Suite D, Boulder, CO 80303 800-548-4024

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(FOR LFMS USE)  
INFORMATION FROM LTS

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM  
AND  
REGIONAL LICENSING SECTIONS

PROGRAM CODE: 02200  
STATUS CODE: 0  
FEE CATEGORY: 7C  
EXP. DATE: 19940430  
FEE COMMENTS: 7C EFF 7/25/90  
DECOM FIN ASSUR REQD: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

APPLICANT/LICENSEE: ADVACARE MANAGEMENT SERVICES, INC.  
RECEIVED DATE: 931208  
DOCKET NO: 3030947  
CONTROL NO.: 119079  
LICENSE NO.: 37-28331-01  
ACTION TYPE: AMENDMENT

2. FEE ATTACHED

AMOUNT: \$500.00  
CHECK NO.: 278

3. COMMENTS

SIGNED *Brown R. J.*  
DATE 12-2-93

3. LICENSE FEE MANAGEMENT BRANCH (CHECK WHEN MILESTONE 03 IS ENTERED 1)

1. FEE CATEGORY AND AMOUNT: 7C \$500

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

3. OTHER \_\_\_\_\_

*12/16/93*  
*Called RE w/*  
*approval for*  
*today 07 for 12/16/93.*

SIGNED *[Signature]*  
DATE 12/16/93