

~~Dupl Copy~~

34-02669

✓
5

NOTE TO: License Fee Management Branch, ADM

FROM: Region 3

SUBJECT: VOIDED APPLICATION

Control Number 84651

Jan 2nd no fee

Applicant Riverside Methodist Hospital

Date Voided 2-29-88

Reason for Void only provided update

of information on qualifications
of existing RSO

Signature Loren Hunter

Attachment:
Application

Information need be an amendment

RECEIVED
88 APR 11 11:15

OK LPMB
no fee pd

8805090048 880411
REG3 LIC30
34-01055-01 PDR

1/1
M 230

CONVERSATION RECORD

TIME

7:50

DATE

2-29-88

TYPE

☐ VISIT

☐ CONFERENCE

☒ TELEPHONE

☐ INCOMING

☐ OUTGOING

Location of Visit/Conference:

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU

Blenda Jackson

ORGANIZATION (Office, dept., bureau, etc.)

Flem. HQ

TELEPHONE NO.

492-8740

SUBJECT

C/N 84651 Riverside Methodist Hospital

ROUTING

NAME/SYMBOL

INT

SUMMARY

Returned her call re inquiry as to whether this submitted providing an update of information on qualifications of existing RSO. Required an endorsement to license. I told her it did not and we were voiding the application. She said she would have Cheryl Phillips send us the package.

ACTION REQUIRED

Void application - C/N 84651

NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

LOREN HUETER

Loren J. Hueter

2-29-88

ACTION TAKEN

SIGNATURE

TITLE

DATE

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM
AND
REGIONAL LICENSING SECTIONS

(FOR LFMS USE)
INFORMATION FROM LMS

PROGRAM CODE: 02120
STATUS CODE: 0
FEE CATEGORY: 7C 2G
EXP. DATE: 19900430
FEE COMMENTS: (EX 2G?)

LICENSE FEE TRANSMITTAL

A. REGION III

1. APPLICATION ATTACHED

APPLICANT/LICENSEE: RIVERSIDE METHODIST HOSPITAL
RECEIVED DATE: 871224
DOCKET NO: 3002669
CONTROL NO.: 384651
LICENSE NO.: 34-01055-01
ACTION TYPE: AMENDMENT

2. FEE ATTACHED

AMOUNT: 2

CHECK NO.: 2

3. COMMENTS

SIGNED
DATE

12/30/87

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

1. FEE CATEGORY AND AMOUNT: _____

2. CORRECT FEE PAID, APPLICATION MAY BE PROCESSED FOR:

AMENDMENT _____

RENEWAL _____

LICENSE _____

3. OTHER _____

SIGNED
DATE

*To be voided per G Jackson
& S. Heister. Cheryl*