

May 27, 1998

U.S. Nuclear Regulatory Commission Att: Diane Dandois, Chief License Fee and Accounts Receivable Branch Mail Stop: T-9 E10 Washington, DC 20555-0001

Dear Ms Dandois:

I am requesting an extension of a time for the payment date for GutCheck's annual Materials Fee, invoice # AM3759-98. I would like this time to extend back to March 98. This extension will provide me time to terminate GutCheck's Materials License # 24-32065-01 without further burden. The license authorized possession incident to repackaging and redistribution of carbon-14 labled urea capsules. Due to GutCheck's inability to acquire ¹⁴C urea from the product's manufacture, this license was not needed. No ¹⁴C urea product was ever received for use and/or repackaging by GutCheck. SHC

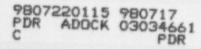
I have attached copies of both the invoice payment and my letter to Region III requesting termination of the Materals License. Please contact me at 573-447-3242 if there are further requirements regarding this request.

Ms. Dandois, GutCheck is a small business concern with limited financial resources, I would appreciate your consideration of my request.

Sincerely,

im No

Tim Hogan, Ph.D. President



U. S. NUCLEAR REGULATORY COMMISSION FY 98 Annual Materials Fee Invoice Period 10/1/1997 - 9/30/1998 10 CFR 171.16

Invoice Date 05/19/1998

4

License Anniversary Month Invoice Number March

AM3759-98

GUTCHECK

ATTENTION: RADIATION SAFETY OFFICER 2101 W. BROADWAY, SUITE 320 COLUMBIA MO 65203-

***** Mark THIS COPY with any billing address changes *****

Code Annual Fee

License/Approval/ Registration/ Certif 24-320

ficate Number	AA905	Category(s)	Fe	e Amount
065-01	ANN	38		2,800.00
		TOTAL:	\$	2,800.00

TOTAL INVOICE: \$ 2,800.00

Amount Billed Represents 50% Proration

If paid by Fedwire see attached Terms and Conditions. If paid by check, make check payable to the NRC (reference Invoice no.) and mail to: U.S. Nuclear Regulatory Commission <=== This PO Box address is License Fee & Accounts Receivable Branch <=== for receipt of payments P.O. Box 954514 <=== only. St. Louis, MO 63195-4514

For terms and conditions see attached. Payment must be received within 30 days of the date of this invoice to avoid late charges. Questions: call 301/415-7554

> ****** * PAYMENT COPY *****

===> To ensure accurate credit, return this copy of the <=== ===> invoice with your payment. Processing may be <=== ===> delayed if the invoice is not included. <===