

NOTE TO: License Fee Management Branch, ADM

FROM: Region IV

SUBJECT: VOIDED APPLICATION

Control Number

461 442

Applicant

Baptist Medical Center

Date Voided

4/24/87

Reason for Void

Amendment no longer
necessary under new
Part 35.

Signature

Jeff A. Marshall

Attachment:
Application

OK LFM B
no fee p d

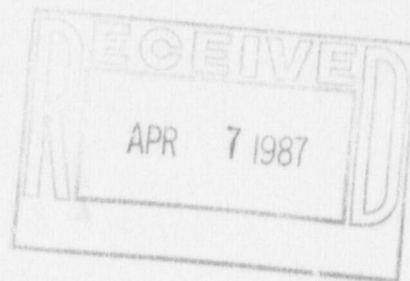
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REG4 LIC30
35-11022-02 PDR

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UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION IV
611 RYAN PLAZA DRIVE, SUITE 1000
ARLINGTON, TEXAS 76011



BETWEEN: William O. Miller, Chief
License Fee Management Branch
Office of Administration

R. J. Everett, Chief
Material Radiation Protection Section, TPB,
DV&TP, RIV

LICENSEE FEE TRANSMITTAL

A. REGION IV

1. APPLICATION ATTACHED

Applicant/Licensee:

Application Dated:

Control No.:

License No.:

Baptist Med Ctr

3/27/87

461442

(030-09646) 35-11022-02

2. FEE ATTACHED

Amount:

Check No.:

/
/

3. COMMENTS

Signed

Laura Hurley

Date

3/30/87

B. LICENSEE FEE MANAGEMENT BRANCH

1. Fee Category and Amount: 7A

2. Correct Fee Paid. Application may be processed for:

Amendment /

Renewal /

License /

FEE EXEMPT

Signed

M. Messer

Date

4/3/87