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NOTE TO: License Fee Management Branch, ADM

FROM:

Region TI

SUBJECT: VOIDED APPLICATION

Control Number

Applicant

Letter Hospital

Date Voided

Reason for Void

animoment not necessary

Signature - Bace Multit

Attachment: Application

ok LFMB no fee callected

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## UNITED STATES NUCLEAR REGULATORY COMMISSION REGION III

799 ROOSEVELT FOAD GLEN ELLYN, ILLINOIS 60137 03000540 02300

BETWEEN:

Renewal

License

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

Regional License Section Material Licensing Branch Safety & Safeguards

FCMS, Office of Nuclear Material LICENSE FEE TRANSMITTAL REGION /// 1. APPLICATION ATTACHED Galder Arapeles Applicant/Licensee: Application Dated: CONTROL NO. 38 31 8 1 Control No .: 48-0212204 License No.: 2. FEE ATTACHED Amount: Check No.: 3. COMMENTS Signed Date В. LICENSE FEE MANAGEMENT BRANCH 1. Fee Category and Amount: oided not necessary 2. Correct Fee Paid. Application may be processed for: Amendment

Signed