

## St. Francis Medical Center

Writer's Direct Dial: 412/622-4213

October 30, 1987

Ms. Doris Foster
Material Licensing Branch
Division of Fuel Cycle and
Material Safety
US Nuclear Regulatory Commission
Region I, 631 Park Avenue
King of Prussia, Pennsylvania 19406

RE:

NRC LICENSE RENEWAL #37-01072-02 St. Francis Medical Center Radiation Therapy Department

45th Street, Pittsburgh, Pennsylvania 1520

Dear Ms. Foster:

Pursuant to our conversation today, enclosed is a check for \$30.00, which is in addition to our check in the amount of \$320.00, dated October 27, 1987, for a total of \$350.00, the originally requested license renewal fee. When this check was being prepared, the fiscal clerk inadvertently wrote the check for \$320 instead of \$350.

We hope this has caused you no inconvenience, and truly appreciate your taking the time to match this mailing with our original mailing to you.

If you have any questions, please do not hesitate to contact me.

8904060123 880312 REG1 LIC30 PNU Sincerely,

Joan F. Slanders

Enclosures

PS: Also enclosed are two additional copies of our original renewal ap ication.

Log\_

Remitter

Date Check

412/622-4343

(FOR LFMS USE) INFORMATION FROM LMS : PROGRAM CODE: 02300 CHASE EE MANAGEMENT BRANCH, ARM : STATUS CODE: 2 AND : FEE CATEGORY: 7A REGIONAL LICENSING SECTIONS : EXP. DATE: 19871130 FEE COMMENTS LICENSE EE TRANSMITTAL A PLICATION ATTACHED A LICANT/LICENSEE: ST. FRANCIS MEDICAL CTR. # REIVED DATE: 871030
# ROCKET NO: 3000461
# CONTROL NO.: 108001 108001 108001 108001 37-01072-02 A T N TYPE: RENEWAL NO.: 052872 4 053357 TS B LICENSE FEE MANAGEMENT BRANCH (CHECK WHEN MILESTONE DE IS ENTERED /\_/) ATEGORY AND AMOUNT: CONTECT FEE PAID. APPOICATION MAY BE PROCESSED FOR: AMENOMENT AL LICE SE SIGNED DATE