

DATE: 3/4/02

TO: Shirley Crutchfield, OCFO/DAF/LFARB
FROM: Sheryl Villar, RI/DNMS/LAT

Region I Transmittal Form for
Reciprocity Submittals (NRC FORM 241)

☒ INITIAL 241 PACKAGE

☐ REVISION

LICENSEE NAME: Integral PET Associates, LLC

LICENSE NO. NY-5058

CHECK NO. 21536 CHECK AMOUNT \$ 1,400.00

PACKAGE ACCESSION NO. IN ADAMS: ML 020600377

ATTACHMENTS:

1. CHECK
2. COPY OF CHECK

2002 MAR -7 PM 3:57

Log	<u>Mar 1 241</u>
Remitter	
Check No.	<u>21536</u>
Amount	<u>11400</u>
Fee Category	<u>16</u>
Type of Fee	<u>APP</u>
Date Check Rec'd.	
Date Completed	<u>3/14/02</u>
By:	<u>SC</u>

Rev. 04/19/01