

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LFMS USE)
INFORMATION FROM LTS

: Program Code: 03225
: Status Code: 0
: Fee Category: 3P
: Exp. Date: 20041231
: Fee Comments: _____
: Decom Fin Assur Req'd: Y
:

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: MAXIM TECHNOLOGIES, INC.
Received Date: 20041118
Docket No: 3019478
Control No.: 313983
License No.: 24-17152-02
Action Type: Amendment

2. FEE ATTACHED

Amount: _____
Check No.: Ø

3. COMMENTS

Signed J. A. Hersey
Date 12-22-2004

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /_/_/)

1. Fee Category and Amount: _____

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

Amendment _____
Renewal _____
License _____

3. OTHER _____

Signed _____
Date _____