

BETWEEN: : (FOR LFMS USE)  
: INFORMATION FROM LTS  
: -----  
:   
License Fee Management Branch, ARM : Program Code: 03225  
and : Status Code: 0  
Regional Licensing Sections : Fee Category: 3N  
: Exp. Date: 20050831  
: Fee Comments: \_\_\_\_\_  
: Decom Fin Assur Req'd: N  
: ::::::::::::::::::::::::::::::::::::::

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: SIEMENS MEDICAL SOLUTIONS USA, INC.  
Received Date: 20050125  
Docket No: 3035837  
Control No.: 136351  
License No.: 29-32349-01  
Action Type: Termination

2. FEE ATTACHED

Amount: /  
Check No.: /

3. COMMENTS

Ref. 136513 change  
from Amend to Term

Signed [Signature]  
Date 2/28/06

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 \_\_\_\_\_