

BETWEEN:

```
: Program Code: 03620  
: Status Code: 0  
: Fee Category: EX 3M  
: Exp. Date: 20130331  
: Fee Comments: 170.11(A)(4)  
: Decom Fin Assur Req'd: Y  
: .....
```

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

APPLICATION ATTACHED: INDIANA UNIVERSITY-PURDUE UNIVERSIT
Applicant/Licensee: 20051207
Received Date: 3032591
Docket No.: 315070
Control No.: 13-26370-01
License No.: Amendment
Action Type:

2. FEE ATTACHED

Amount:
Check No.:

3. COMMENTS

Signed D. A. Hersey
Date 12-19-2007

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 _____