

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

(FOR LFMS USE)  
INFORMATION FROM LTS  
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Program Code: 02310  
Status Code: 0  
Fee Category: 7A 2B  
Exp. Date: 20150831  
Fee Comments: \_\_\_\_\_  
Decom Fin Assur Req'd: Y  
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LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: KARMANOS CANCER CENTER  
Received Date: 20060428  
Docket No: 3009376  
Control No.: 315398  
License No.: 21-04127-06  
Action Type: Amendment

2. FEE ATTACHED

Amount: \_\_\_\_\_  
Check No.: Ø

3. COMMENTS

Signed D. A. Hersey  
Date 5-3-2006

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 \_\_\_\_\_