

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

(FOR LFMS USE)  
INFORMATION FROM LTS

Program Code: 02201  
Status Code: 0  
Fee Category: 7C  
Exp. Date: 20121130  
Fee Comments: \_\_\_\_\_  
Decom Fin Assur Reqd: N  
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LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED  
Applicant/Licensee: MIDWEST CARDIOLOGY ASSOCIATES, P.C.  
Received Date: 20060824  
Docket No: 3036148  
Control No.: 315667  
License No.: 15-32428-01  
Action Type: Amendment

2. FEE ATTACHED  
Amount: \_\_\_\_\_  
Check No.: \_\_\_\_\_

3. COMMENTS

Signed \_\_\_\_\_  
Date 8-31-06

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 \_\_\_\_\_