

VOID SHEET

TO: License Fee Management Branch
FROM: RIII - Materials Licensing Branch
SUBJECT: **VOIDED AMENDMENT REQUEST**

Control Number: **577584**

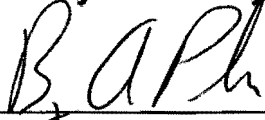
Applicant: **Missouri Delta Medical Center**

License Number: **24-12876-02**

Docket Number: **030-02377**

Date Voided: **June 12, 2012**

Reason for Void: **This was processed in as an amendment request, but the letter dated May 7, 2012 was actually the "original" of additional information for an existing control number (#577130). This letter was initially provided by fax from the licensee on May 21, 2012 (ML12143A380) and used to complete the aforementioned action by me on May 22. Therefore, the action is voided.**



Signature
Bryan A. Parker
Health Physicist

06/12/12

Date

Attachment:
Official Record Copy of
Voided Action
FOR LFMB USE ONLY

☐ Refund Authorized and processed

☐ No Refund Due

☐ Fee Exempt or Fee Not Required

Comments: _____ Log completed _____

Processed by: _____