

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - _____

SUBJECT: VOIDED APPLICATION

Control Number:

301654

Applicant:

Sr. John's Mercy Medical Cn.

License Number:

24-00794-

Docket Number:

030-02283

Date Voided:

2 August 1996

Reason for Void:

NOTIFICATION NOT AMENDMENT

RSO'S NAME CHANGED BECAUSE OF DIVORCE. UPDATE HER
~~MARRIED~~ MARRIED NAME IN LICENSE AT NEXT AMENDMENT
OR RENEWAL

Signature

[Signature]

Date

2 August 1996

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: SAC 11/22/96

270116

9611290142 960802
PDR ADOCK 03002283
C PDR

ML 30 SD

CONVERSATION RECORD

TIME

DATE

Morning

1 August 1996

☐ VISIT☐ CONFERENCE☒ TELEPHONE

INCOMING

☒ OUTGOING

NAME OF PERSON(S) CONTACTED

ORGANIZATION (OFFICE, DEPT. ETC.)

TELEPHONE NO.

Julia Marlette

St. John's Mercy Medical Center (314) 569-6000

SUBJECT

Clarification of notification.

SUMMARY

Marlette sent the NRC a notification that she had changed her name from Julia Quint to Julia Marlette as the result of a divorce. Marlette stated that the letter was to inform the NRC of the change in her name, but it wasn't an amendment to the license. I asked Marlette if we could change her name at the next amendment or renewal and she agreed to this. I also asked Marlette if she wanted the divorce papers she sent returned, because they contained personnel information that would not be appropriate in the public document room. Marlette stated that she sent the divorce papers as proof of her name change and did NOT want them to go to the public document room. Marlette requested that I destroy the divorce papers. I reviewed the divorce paper and confirmed that Marlette was granted restoration of her maiden name "Marlette" by the Commissioner of the proceedings on 12 July 1996. I destroyed the divorce papers as she requested.

I also put a notice in the file that the RSO's name should be from Quint to Marlette at the next amendment or renewal.

ACTION REQUIRED

Phone call.

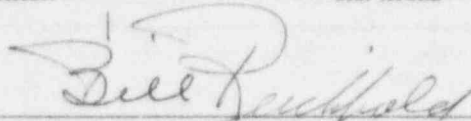
NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

Bill Reichhold

2 August 1996





UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION III
801 WARRENVILLE ROAD
LISLE, ILLINOIS 60532-4351

July 29, 1996

Shan Quint, M.S.
Radiation Safety Officer
St. John's Mercy Medical Center
615 S. New Ballas Road
St. Louis, MO 63141-8277

SUBJECT: ACKNOWLEDGEMENT OF CORRESPONDENCE
(☒ Letter ☐ Application ☒ Dated July 23, 1996)

Dear Licensee:

In response to your request, we have completed the initial processing, which is an administrative review of your application for a(n):

☐ New License ☒ Amendment ☐ Renewal
☐ Termination ☐ Auth User (Amendment not required) ☐ QMP Revision
☐ Other _____

No administrative deficiencies were identified during this initial review. However, it should be noted that a technical review may identify omissions in the submitted information, technical issues that require additional information, or policy/technical issues that require coordination with headquarters or other NRC regional offices.

It appears that your request is routine (see 1-3 below, as applicable) and complete.

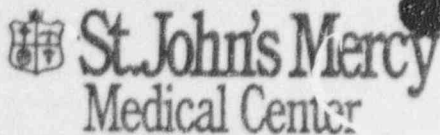
1. New and amendment actions are normally processed within 90 days, unless we find major deficiencies, or policy issues requiring central program office assistance.
2. Renewal actions are normally processed within 180 days, however, under timely filing (before expiration), you may continue to operate under your existing license.
3. Termination actions are normally processed within 90 days, unless confirmatory surveys following decontamination/decommissioning activities are involved.

A copy of your correspondence has been forwarded to our Licensing Fee and Debt Collection Branch (301/415-6097) for approval of the fee category and amount.

If you have a compelling safety or business-related reason for requesting expedited review, please contact the Materials Licensing Branch at (708) 829-9887. We will try to complete your request as soon as practicable. Any correspondence about this request should reference the control number.

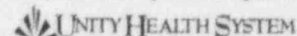
Nuclear Materials Support Branch

Mail Control No. 301654
License No. 24-00794-03



615 South New Ballas Road
St. Louis, MO 63141-8277
314/569-6000

A Member of the St. John's Mercy Health System



W

Per
J. Madson
7-26-96

A

030-02283

July 23, 1996

Nuclear Materials Licensing Branch
Region III, U.S.N.R.C.
801 Warrenville Road
Lisle, IL 60532-4351

Re: Materials License Number 24-00794-03

Dear Sirs;

This letter is to inform you of my name change pursuant to 10 CFR 35.14 (b)(1). I am the Radiation Protection Officer on license number 24-00794-03. I have enclosed copies of pertinent pages of my divorce decree to document this change from Julia Quint to Julia Marlette. Actually, in our license and in most of our correspondence I use my nickname Shan.

Thank you.

Sincerely,

Shan Marlette, M.S.

RECEIVED

JUL 26 1996

REGION III

PM: 7-23-96

St. John's Mercy Medical Center includes St. John's Mercy Hospital (Washington, Missouri), St. John's Mercy Home Health Services, St. John's Mercy Skilled Nursing Center, St. John's Mercy Pain Therapy Center, The Edgewood Program and Meacham Park Health Center.

St. John's Mercy Medical Center is an equal opportunity employer and equal access provider of health care services.

JUL 26 1996

301654

Second Notice

NRC FORM 577
(1-95)

U.S. NUCLEAR REGULATORY COMMISSION

LICENSE FEE REQUIREMENTS

LICENSE FEE AND DEBT COLLECTION BRANCH
DIVISION OF ACCOUNTING AND FINANCE
OFFICE OF THE CONTROLLER
U.S. NUCLEAR REGULATORY COMMISSION
WASHINGTON, DC 20555-0001

ST. JOHN'S MERCY MEDICAL CENTER
ATTN: MS. SHAN MARLETTE
615 SOUTH NEW BALLAS ROAD
ST. LOUIS, MISSOURI 63141-8277

TYPE OF ACTION

- ☐ NEW LICENSE
☐ RENEWAL OF LICENSE
☒ AMENDMENT TO LICENSE

REQUESTED DATE

7-23-96

LICENSE NUMBER

24-00794-03

CONTROL NUMBER

301654

I. APPLICATION FEE DUE

Your request for a licensing action is subject to the fee(s) in the category(ies) noted below in accordance with Section 170.31 of the enclosed Federal Register notice. Payment of the fee is required prior to the issuance of the license, renewal, or amendment.

FEE CATEGORY	APPLICATION	RENEWAL	AMENDMENT
7C	\$	\$	\$ 440.00
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

FEE(s) DUE \$ 440.00
PAYMENT RECEIVED \$ 0.00
AMOUNT DUE \$ 440.00

☒ Your request was received without the prescribed application fee *for name change.*

☐ We received your Check No. _____ in the amount of \$ _____. Payment of the additional fee noted above is required.

☐ Your request will increase the scope of your license program. Therefore, your request is subject to the application fee(s) noted above. Refer to Section 170.31 and Footnote 1(d)(2).

☐ Your license expired prior to the receipt of your application for renewal. Therefore, your request is subject to the application fee(s) noted above. Refer to Section 170.31 and Footnote 1(a).

MAKE PAYMENT OF THE FEE(S) TO THE U.S. NUCLEAR REGULATORY COMMISSION AND MAIL THE PAYMENT TO THE ADDRESS LISTED AT THE TOP OF THIS FORM. IF WE DO NOT RECEIVE A REPLY FROM YOU WITHIN 30 CALENDAR DAYS FROM THE DATE LISTED BELOW, WE SHALL ASSUME THAT YOU DO NOT WISH TO PURSUE YOUR APPLICATION AND WILL VOID THIS ACTION.

SIGNATURE -- LICENSE FEE ANALYST

SHIRLEY CRUTCHFIELD

LFDCB

8/2/96

LFDCB

Distribution:

MAF Correspondence FY
LFDCB Chief LFDCB Analyst
Invoice File w/encl LFDCB R/F (2)

DAF R/F

DATE

Oct. 31, 1996

This form was electronically produced by Elite Federal Forms, Inc.

LICENSE FEE REQUIREMENTS

LICENSE FEE AND DEBT COLLECTION BRANCH
DIVISION OF ACCOUNTING AND FINANCE
OFFICE OF THE CONTROLLER
U.S. NUCLEAR REGULATORY COMMISSION
WASHINGTON, DC 20555-0001

ST. JOHN'S MERCY MEDICAL CENTER
ATTN: MS. SHAN MARLETTE
615 SOUTH NEW BALLAS ROAD
ST. LOUIS, MISSOURI 63141-8277

TYPE OF ACTION

- ☐ NEW LICENSE
☐ RENEWAL OF LICENSE
☒ AMENDMENT TO LICENSE

REQUESTED DATE

7-23-96

LICENSE NUMBER

24-00794-03

CONTROL NUMBER

301654

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SIGNATURE -- LICENSE FEE ANALYST: Shirley Crutchfield LFDCB LFDCB
SHIRLEY CRUTCHFIELD 8/2/96

II. FEE NOT REQUIRED

☐ Enclosed is Check No. _____ which accompanied your request. The fee is not required because:

☐ We received your Check No. _____ in payment of the fee.

☐ The Licensing staff has informed us that your request is to be considered as a continuation of your request dated _____, Control No. _____.

☐ Your request was combined, prior to review, with your _____ request, Control No. _____.

III. CHECK RETURNED

☐ Enclosed is Check No. _____ which was returned to us by the bank for:

- ☐ INSUFFICIENT FUNDS
☐ ACCOUNT CLOSED
☐ OTHER

MAIL THE REPLACEMENT CHECK TO THE ADDRESS LISTED AT THE TOP OF THIS FORM AND REFERENCE THE ABOVE CONTROL NUMBER.

IV. LICENSE ISSUED WITHOUT THE REQUIRED FEE

☐ License No. _____, Amendment No. _____, issued on _____ was issued without the required fee being collected. The fee required is noted in Section I of this form.

☐ The scope of your licensed program was increased. Therefore, your request is subject to the application fee(s) noted in Section I of this form. Refer to Section 170.31 and Footnote 1(d)(2).

☐ Because of the urgency of your request, the license was issued without remittance of the prescribed fee noted in Section I of this form.

Distribution: OC/DAF/RF
Pending Fee File OC/DAF/SF(LF-3 2.7)
LFARB R/F (2) Region 3

DATE Aug 5, 1996

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM
AND
REGIONAL LICENSING SECTIONS

(FOR LFMS USE)
INFORMATION FROM LTS

PROGRAM CODE: 02120
STATUS CODE: 0
FEE CATEGORY: 7C 2B
EXP. DATE: 20011231
FEE COMMENTS: NOT BROAD/GJ & RIII
DECOM FIN ASSUR RECD: N
.....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED
APPLICANT/LICENSEE: ST. JOHN'S MERCY MEDICAL CTR.
RECEIVED DATE: 960726
DOCKET NO: 3002283
CONTROL NO.: 301654
LICENSE NO.: 24-00794-03
ACTION TYPE: AMENDMENT

2. FEE ATTACHED
AMOUNT: 0
CHECK NO.: 0

3. COMMENTS

SIGNED _____
DATE 7/24/96

B. LICENSE FEE MANAGEMENT BRANCH (CHECK WHEN MILESTONE 03 IS ENTERED ☒)

1. FEE CATEGORY AND AMOUNT: 7C 2B

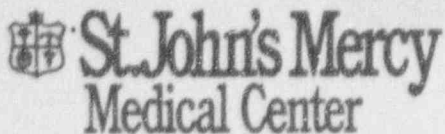
2. CORRECT FEE PAID. APPLICATION MAY BE PROCESSED FOR:
AMENDMENT ☒
RENEWAL _____
LICENSE _____

3. OTHER _____

SIGNED _____
DATE _____

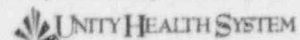
Log	<u>Aug 1 III</u>
Remitter	_____
Check No.	_____
Amount	_____
Fee Category	<u>7C 2B</u>
Type of Fee	<u>AmD</u>
Date Check Rec'd	_____
Date Completed	_____
By:	_____

1096 AUG - 2 AM 11: 27



615 South New Ballas Road
St. Louis, MO 63141-8277
314/569-6000

A Member of the St. John's Mercy Health System



July 23, 1996

Nuclear Materials Licensing Branch
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801 Warrenville Road
Lisle, IL 60532-4351

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301654

JUL 26 1996

STATE OF MISSOURI)
) SS.
COUNTY OF ST. CHARLES)

IN THE CIRCUIT COURT OF THE COUNTY OF ST. CHARLES, MISSOURI
CIRCUIT JUDGE DIVISION

IN RE THE MARRIAGE OF:)
)
RANDALL HENRY QUINT,)
SSN: 500-46-5067)
)
- Petitioner,)
) Cause No. CV196-3061DR
vs.)
) Division 4
JULIA MARSHAN QUINT,)
SSN: 379-50-1022)
)
Respondent.)

JUDGMENT AND DECREE FOR DISSOLUTION OF MARRIAGE

Now on this 12th day of July, 1996, comes the Petitioner, RANDALL HENRY QUINT, in person and by his attorney, Mary Ann Weems, and Respondent, JULIA MARSHAN QUINT, ~~in person~~ appears *not*. *ncd 7/12/96*

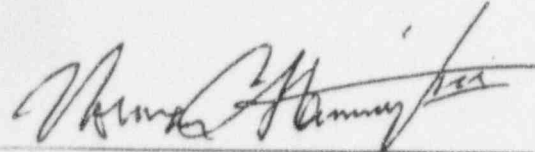
Whereupon, this cause coming on regularly to be heard and being called, the parties announce ready. Thereupon, Petitioner submits the cause to the Court on the pleadings and proof and Separation Agreement of the parties. Upon hearing the evidence, the Court finds that Petitioner has been a resident of the State of Missouri for more than ninety (90) days preceding the filing of the Petition; that the Petition was filed more than thirty (30) days preceding the hearing thereon; that neither Petitioner nor Respondent are now on active duty as members of the Armed Forces of the United States; that the Court has, to the extent it has jurisdiction, considered provisions for maintenance of either party and the disposition of

of which is attached hereto as Exhibit 1, shall be incorporated in said Judgment and Order for Dissolution of Marriage.

It is further ORDERED, ADJUDGED AND DECREED that Respondent is granted restoration of her maiden name of "Julia Marshan Marlette".

If is further ORDERED, ADJUDGED AND DECREE that the parties shall equally divide the Court costs of this action.

SO ORDERED this 12th day of July, 1996.


JUDGE Commissioner
Division ~~X~~ 10

FILED
JUL 12 1996
SUSAN E. BROWN
Clerk
ST. CHARLES COUNTY