

OCT 11 1984

Chicago Osteopathic Medical Center
Radiology Department
5200 South Ellis Avenue
Chicago, IL 60615

License No. 12-04390-02
Control No. 77549

SUBJECT: LICENSE RENEWAL APPLICATION

Gentlemen:

This is to acknowledge receipt of your application for renewal of the material(s) license identified above. Your application is deemed timely filed, and accordingly, the license will not expire until final action has been taken by this office.

Any correspondence regarding the renewal application should reference the control number specified and your license number.

Sincerely,

Original Signed
Patricia M. Vacherlon
Material Licensing Section
Region III

8512020590 851101
REG3 LIC30
12-04390-02 PDR

RIII

Vacherlon/as
10/11/84