

JUL 16 1987

Dean Broga, Ph.D.  
7721 Kenmore Circle  
Richmond, VA 23225

Dear Dr. Broga:

In accordance with our July 15, 1987 telephone conversation, enclosed is a copy of our June 18, 1987 letter to your client OB/GYN Associates. I understand that Dr. Miller is no longer with OB/GYN Associates and that information concerning this change will be provided by OB/GYN Associates. As we discussed, the \$120 amendment fee requested in our June 18, 1987 letter is required, and should accompany the submission of the information concerning Dr. Miller. The fee and additional information should be sent to my attention at our Washington, D.C. address, and should reference CONTROL NUMBER 251618.

If you have any questions concerning this matter, please let me know.

Sincerely,

Signed by:  
Glenda Jackson

Glenda Jackson  
License Fee Management Branch  
Division of Accounting and Finance  
Office of Administration and  
Resources Management

Enclosure:  
6/18/87 Letter

DISTRIBUTION:  
Pending Fee File  
ARM/DAF  
LFMB R/F (2)  
DW/GJ/Dr. Broga

BB01220088 870814  
REG2 LIC30  
45-24894-01 PDR

OFFICE: ARM/LFMB  
SURNAME: GJackson:rej  
DATE: 7/16/87

## CONVERSATION RECORD

TIME

9:45

DATE

7/15/87

TYPE

☐ VISIT☐ CONFERENCE☒ TELEPHONE☐ INCOMING☒ OUTGOING

ROUTING

NAME/SYMBOL

INT

Location of Visit/Conference:

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU

ORGANIZATION (Office, dept., bureau, etc.)

TELEPHONE NO.

804-  
786-9131

SUBJECT

OB/BYN's 5/24/87 request to amend

Business 45-24894-01 (251618)

SUMMARY

Dr. Broga stated that Dr. Miller is no longer with OB/BYN and asked what steps should be taken with regard to the audit (pending). I advised Dr. Broga to request OB/BYN to send me a ltr, with the \$120 fee, explaining that Dr. Miller is no longer with OB/BYN and withdraw that portion of the 5/24/87 request. I sent Dr. Broga a copy of my 6/18/87 ltr to him since he had not rec'd one. He will make sure that OB/BYN has a copy (he is not sure what Dr. Miller would have done with the fee request).

ACTION REQUIRED

NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

E Jackson

8/7/15/87

ACTION TAKEN

SIGNATURE

TITLE

DATE