

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

: Program Code: 03121
: Status Code: 0
: Fee Category: 3P
: Exp. Date: 20110430
: Fee Comments:
: Decom Fin Assur Req'd: N
:.....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: LEE'S SUMMIT, CITY OF
Received Date: 20080311
Docket No.: 3029042
Control No.: 316964
License No.: 24-24640-01
Action Type: Termination

2. FEE ATTACHED

Amount: _____
Check No.: 0

3. COMMENTS

Signed M. Buchholz
Date 3-11-08

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 _____