

VOID SHEET

TO: License Fee Management Branch

FROM: RIII - Materials Licensing Branch

SUBJECT: **VOIDED AMENDMENT REQUEST**

Control Number: **584887**

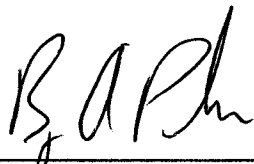
Applicant: **Oakwood Hospital - Southshore**

License Number: **21-16656-01**

Docket Number: **030-11427**

Date Voided: **October 22, 2014**

Reason for Void: **Licensee's action was opened on 09/19/14 as an amendment. At that time, the licensee also had a notification under review for a change-of-control (CN 584407). After discussion with the MLB Chief, it was decided that this action could be combined with the notification action, so CN 584887 should be voided.**



Signature
Bryan A. Parker
Health Physicist

10/22/14
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: _____