Dear Laboratory Director:

Attached below is your clinical laboratory license. Your license is void after the expiration date below.

Expiration Date: December 29, 2012

UCD MEDICAL CENTER SACRAMENTO
4400 V ST
SACRAMENTO CA 95817-1464

DISPLAY:
State law requires that the clinical laboratory license shall be conspicuously posted in the clinical laboratory.

CHANGE OF LABORATORY NAME, DIRECTOR, OWNER AND/OR ADDRESS:
State law requires that you notify this office WITHIN 30 DAYS of any change in ownership, name, location or laboratory directors. YOUR LICENSE ALSO WILL BE AUTOMATICALLY REVOKED 30 DAYS AFTER A MAJOR OWNER AND/OR DIRECTOR CHANGE OCCURS. Mail written notification of the above changes to the address indicated below:

California Department of Public Health
Laboratory Field Services, Facility Licensing Section
850 Marina Bay Parkway, Building P, 1st Floor
Richmond, CA 94804-6403

Thank you for your cooperation.

Lab ID Number: CLF 00001189
Effective Date: December 31, 2011
Valid Until: December 29, 2012
CLIA Number: 05D0615657

Cheif
Beatrice R. O'Keefe, Division Chief
Laboratory Field Services