Dear Tissue Bank:
Attached below is your tissue bank license. Your license is void after the expiration date.

NOTE: Application for renewal of license must be filed with the department not less than 30 days prior to its expiration date and shall be accompanied by the annual renewal fee. (CA H&S Code §1639.2)

UCDMC CARDIAC ALLOGRAFT TISSUE BANK
MAIN OPERATING RM., SURGICAL SERVICES
2315 STOCKTON BLVD.
SACRAMENTO, CA 95817

ATTN: JASON GOODWIN, RN

FORFEITURE OF LICENSE
A Tissue Bank license shall be forfeited by operation of law prior to its expiration date when one of the following occurs:
1. The tissue bank is sold or otherwise transferred.
2. The license is surrendered to the state department.

QUESTIONS AND INFORMATION:
If you have any questions, please write to:

STATE OF CALIFORNIA
DEPT. OF PUBLIC HEALTH
Laboratory Field Services
850 Marina Bay Parkway, Bldg P, 1st Floor
Richmond, CA 94804-6403

Thank you for your cooperation.

STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
TISSUE BANK LICENSE
In accordance with Division 2, Chapter 4.10 of the Health and Safety Code, the entity named below is hereby licensed to engage in the operation of a tissue bank at the indicated address

UCDMC CARDIAC ALLOGRAFT TISSUE BANK
2315 STOCKTON BOULEVARD, MAIN OPERATING ROOM
SACRAMENTO, CA 95817

Owner(s) Name: REGENTS, UNIVERSITY OF CALIFORNIA
Address: 1111 FRANKLIN ST, 12TH FL
OAKLAND, CA 94607
City, State, Zip: TISSUE BANK ID NUMBER: CNC 80244

Tissue Bank Director: JASON GOODWIN, RN

Issuance Date: DECEMBER 31, 2014
Expiration Date: DECEMBER 30, 2015

Ronald Harkey, Chief, Tissue Bank Licensing Section
Laboratory Field Services