Dear Tissue Bank Director:

Attached below is your tissue bank license. Your license is void after the expiration date.

NOTE: Applications 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)

UCDHS BREAST MILK BANK
2315 STOCKTON BLVD
ATTN: SHERYL A. RUTH, RN
SACRAMENTO CA 95817-2201

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:
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
Laboratory Field Services, Tissue Bank Section
850 Marina Bay Parkway, Building P, 1st Floor
Richmond, CA 94804-6403
Internet Address: www.cdph.ca.gov/LFS
Thank you for your cooperation.

TISSEUE BANK LICENSE
In accordance with Division 2, Chapter 4.1, of the Health and Safety Code, the entity named below is hereby licensed to engage in the listed tissue bank operation(s) at the indicated facility address.

UCDHS BREAST MILK BANK
2315 STOCKTON BLVD.
SACRAMENTO CA 95817

OWNER(S):
REGENTS OF THE UNIVERSITY OF CALIFORNIA

DIRECTOR(S):
LYDIA HOWELL MD

TISSUE BANK ID Number: CTB 00080713
Issuance Date: April 22, 2020
Expiration Date: April 21, 2021

Robert J. Thomas, Acting Branch Chief
Laboratory Field Services
UCDHS BREAST MILK BANK
2315 STOCKTON BLVD
ATTN: SHERYL A. RUTH, RN
SACRAMENTO CA 95817-2201