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)

EVERSIGHT ILLINOIS, CHICAGO
4889 VENTURE DRIVE
ANN ARBOR, MI 48108

ATTN: EBONY MORALES

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, 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

EVERSIGHT ILLINOIS, CHICAGO
547 WEST JACKSON BLVD. SUITE 600
CHICAGO, IL 60661

Owner(s) Name: EVERSIGHT
Address: 4889 VENTURE DRIVE
City, State, Zip: ANN ARBOR, MI 48108
TISSUE BANK ID NUMBER: CNC 81149
Issuance Date: JULY 20, 2015
Expiration Date: JULY 19, 2016

Tissue Bank Director:
KEVIN W. ROSS

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