

**CLINICAL LABORATORY PERMIT**



**pennsylvania**  
DEPARTMENT OF HEALTH

*Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:*

Laboratory Identification Number: 30827

Name and Director of Laboratory:

NEW YORK BLOOD CENTER, INC.  
NANCY LEE VANBUREN, M.D.  
737 PELHAM BOULEVARD  
ST PAUL, MN 55114

Owner:

ISSUE DATE: August 15, 2020

DATE EXPIRES: August 15, 2021

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY  
HEMATOLOGY  
IMMUNOHEMATOLOGY  
NON-SYPHILIS SEROLOGY  
SYPHILIS SEROLOGY  
VIROLOGY



Rachel L. Levine, MD  
Secretary of Health

DISPLAY THIS CERTIFICATE PROMINENTLY

This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.