

**NEW YORK STATE DEPARTMENT OF HEALTH
PROVISIONAL LICENSE FOR TISSUE BANK OPERATION**

Issued in accordance with and pursuant to section 4364 Public Health Law of New York State

Tissue Bank ID No.: GA045

Tissue Bank Director: Catherine M. Springford, MT (ASCP)

Medical Director: George L. Mutter, M.D.

**California Cryobank, Inc.
950 Massachusetts Avenue
Cambridge, MA 02139**

is hereby **APPROVED** as a Tissue Bank for the following categories of service:

**Comprehensive Tissue Procurement Service
Tissue Processing Facility**

**Reproductive tissue, semen only
Reproductive tissue, semen only**

DOH
STATE OF NEW YORK
DEPARTMENT OF HEALTH

Issued: June 26, 2009

Expired: July 1, 2010

Owner: California Cryobank, Inc.

Property of the New York State Department of Health. Valid only at the address shown. Must be conspicuously posted.

DOH-3908 (04/2001)