



*Certifies that the Institution named below:*

***EVERSIGHT***

***Cleveland, OH***

*has met the association's Medical Standards and accreditation requirements and is hereby accredited for the following eye bank functions:*

**Recovery, Tissue Storage, and Tissue Evaluation**

***Effective Dates***

October 17, 2024 – November 30, 2027

A handwritten signature in black ink, appearing to read "A. [unclear]", positioned above a horizontal line.

*Chair, Board of Directors*

A handwritten signature in black ink, appearing to read "R. P. [unclear]", positioned above a horizontal line.

*President & CEO*

Accreditation # 0024204