

DEPARTMENT OF PUBLIC HEALTH

850 Marina Bay Parkway, Bldg P, 1st Floor
Richmond, CA 94804-6403
(510) 620-3800



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)

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.

**MEDICAL EYE BANK OF WEST VIRGINIA
3 COURTNEY DRIVE
CHARLESTON, WV 25304**

ATTN: KENNETH R. SHERIFF, EXECUTIVE DIRECTOR

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.

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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

**MEDICAL EYE BANK OF WEST VIRGINIA
3 COURTNEY DRIVE
CHARLESTON, WV 25304**

Owner(s) Name: **MEDICAL EYE BANK OF WEST VIRGINIA**
Address: **3 COURTNEY DRIVE**
City, State, Zip: **CHARLESTON, WV 25304**

Tissue Bank Director:

KENNETH R. SHERIFF, CEBT

TISSUE BANK ID NUMBER: **CNC 80653**

Issuance Date: **AUGUST 9, 2015**

Expiration Date: **AUGUST 8, 2016**

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