



MARYLAND  
DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
OFFICE OF HEALTH CARE QUALITY

SPRING GROVE CENTER  
BLAND BRYANT BUILDING  
55 WADE AVENUE  
CATONSVILLE, MD 21228-4663

**TISSUE BANK PERMIT**

NUMBER: TB1847      EFFECTIVE PERIOD: 07/01/2015 - 06/30/2016

*Pursuant to the provisions of TITLE 17, subtitle 3, Health-General Article § 17-301 et seq.,  
Annotated Code of Maryland, this permit is issued to:*

**LIONS EYE BANK OF WISCONSIN**  
**2401 AMERICAN LANE**  
**MADISON, WI 53704**

**Director: Dr NEAL BARNEY**

**Owner: LIONS EYE BANK OF WISCONSIN**

*For operating, representing or servicing the following Tissue Bank Classes:*

**Eye Bank:**  
Eye

**CONTROL: 61039**

*Patricia Tomsko May, MD*  
**Director**

*Falsification of a license shall subject the perpetrator to criminal prosecution and the imposition of civil fines.*