



Dear Tissue Bank Director:

Attached below is your tissue bank license.
Your license is void after the expiration date.

NOTE: Applications 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)

VISIONGIFT
27 WORMWOOD ST STE 100
ATTN: ALLISON ANDERSEN
BOSTON MA 02210-1625

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.

QUESTIONS AND INFORMATION:

If you have any questions, please write to:

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
Laboratory Field Services, Tissue Bank Section
850 Marina Bay Parkway, Building P, 1st Floor
Richmond, CA 94804-6403

Internet Address: www.cdph.ca.gov/LFS

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 4.1, of the Health and Safety Code, the entity named below is hereby licensed to engage in the listed tissue bank operation(s) at the indicated facility address.

VISIONGIFT
27-43 WORMWOOD STREET SUITE 100
BOSTON MA 02210

OWNER(S):
LIONS VISIONGIFT

DIRECTOR:
CHRIS STOEGER

TISSUE BANK ID Number: CTB 00082002

Issuance Date: May 30, 2024

Expiration Date: May 29, 2025

Robert J. Thomas, Branch Chief
Laboratory Field Services