Dear Laboratory Director:

Attached below is your clinical laboratory license. Your license is void after the expiration date below.

Expiration Date: MARCH 30, 2011

DISPLAY:
State law requires that the clinical laboratory license shall be conspicuously posted in the clinical laboratory.

CHANGE OF LABORATORY NAME, DIRECTOR, OWNER AND/OR ADDRESS:
State law requires that you notify this office WITHIN 30 DAYS of any change in ownership, name, location or laboratory directors. YOUR LICENSE ALSO WILL BE AUTOMATICALLY REVOKED 30 DAYS AFTER A MAJOR OWNER AND/OR DIRECTOR CHANGE OCCURS. Mail written notification of the above changes to the address indicated below:

California Department of Public Health
Laboratory Field Services, Facility Licensing Section
880 Marina Bay Parkway, Building P, 1st Floor
Richmond, CA 94804-6403

Thank you for your cooperation.

State of California Department of Public Health
Clinical Laboratory License

In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons named below are hereby issued a license authorizing operation of a clinical laboratory at the indicated address.

OWNER(S):
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA

DIRECTOR(S):
TIMOTHY R HAMILL MD
THEODORE W KURTZ MD
JOAN E ETZELL MD
ENRIQUE TERRAZAS MD

Karen L. Nickel, Chief
Laboratory Field Services

CLIA Number: 0500643678
Lab ID Number: CLF 1540
Effective Date: MARCH 31, 2010
Valid Until: MARCH 30, 2011