



Dear Laboratory Director:

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

Expiration Date: AUGUST 22, 2009

UCSF POINT OF CARE TESTING LABORATORY - IN PATIENT
REGULATORY AFFAIRS, CAMPUS BOX 0208
505 PARNASSUS AVE.
SAN FRANCISCO, CA 94143-0208

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
850 Marina Bay Parkway, Building P, 1st Floor
Richmond, CA 94804-6403

Thank you for your cooperation.

Labelin 11/28/07
Tear Here

Tear Here

**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 or other site(s) on file with the department.

**UCSF POINT OF CARE TESTING LABORATORY - IN PATIENT
505 PARNASSUS AVENUE LONG/MOFFITT
5TH FLOOR
SAN FRANCISCO, CA 94143**

OWNER(S):

REGENTS OF THE UNIVERSITY OF CALIFORNIA

DIRECTOR(S):

TIMOTHY R HAMILL MD

CLIA Number: 05D0988642
Lab ID Number: CLF 11705
Effective Date: AUGUST 23, 2008
Valid Until: AUGUST 22, 2009

Karen L. Nickel

Karen L. Nickel, Chief
Laboratory Field Services