

Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:

Laboratory Identification Number: 37763

AUTHORIZED CATEGORIES/TESTS:

HEMATOLOGY

Name and Director of Laboratory:

CBC (CLIA Waived)

HCSC-BLOOD CENTER T/A MILLER/KEYSTONE BLOOD CTR D KIP KUTTNER, D.O. 2745A LEISCZ'S BRIDGE ROAD READING, PA 19605

Owner:

HCSC-INC.

ISSUE DATE: August 15, 2024

DATE EXPIRES: August 15, 2025

Debra L. Bogu MD

Debra L. Bogen, MD, FAAP Acting Secretary of Health

DISPLAY THIS CERTIFICATE PROMINENTLY

This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.

