DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION BLOOD ESTABLISHMENT REGISTRATION AND PRODUCT LISTING FOR MANUFACTURERS OF BLOOD PRODUCTS AND LICENSED DEVICES	FEI: 3021916930 DUNS: 118620237 U.S. License Number:	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE: Philadelphia VALIDATED BY FDA: 11/26/2025			
LEGAL NAME AND LOCATION: HCSC-Blood Center 740 Hamilton Street Suite 120 Allentown, PA 18101 USA	REPORTING OFFICIAL: Kelly Hartman, Director of Qualit HCSC-Blood Center 1465 Valley Center Parkway	ty Assurance	U.S. AGENT:			
800-232-3667	Bethlehem, PA 18017 USA 6106915850 x1286 khartman@giveapint.org					
OTHER NAMES USED IN THIS LOCATION:	TYPE OF OWNERSHIP: CORPORATION		ESTABLISHMENT TYPE: COLLECTION FACILITY			
	DONOR/RECIPIENT RELATIO ALLOGENIC	NSHIP:				

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	-	PATHOGEN REDUCED	POOLED
WHOLE BLOOD	х									·		
RED BLOOD CELLS (RBC)			Х									
PLATELETS			Х									
FRESH FROZEN PLASMA			Х									

***** End Of Report *****