



Dear Laboratory Director:

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

Expiration Date: September 3, 2016

BIOREFERENCE LABORATORIES, INC.  
25 BIRCH ST BLDG C  
MILFORD MA 01757-3585

**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 the laboratory owner and/or the director 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.**

You must submit a completed application for a new clinical laboratory license or registration within those 30 days or cease engaging in clinical laboratory practice. Mail written notification and/or application 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.

Lab 142 Labclin (11-12)

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<p><b>State of California Department of Public Health</b></p> <p><b>CLINICAL LABORATORY LICENSE</b></p> <p>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.</p> <p><b>BIOREFERENCE LABORATORIES, INC.</b> <b>25 BIRCH ST., BLDG. C, 3RD FLOOR</b> <b>MILFORD MA 01757</b></p>	
<p><b>OWNER(S):</b> BIOREFERENCE LABORATORIES, INC. MARC GRODMAN MD HOWARD DUBINETT SAM SINGER GARY LEDERMAN JOHN (ET AL) ROGLIERI</p>	<p><b>DIRECTOR(S):</b> SHIPHALI GUPTA PHD</p>
<p><b>Lab ID Number: COS 00800341</b> <b>Effective Date: September 05, 2015</b> <b>Valid Until: September 03, 2016</b> <b>CLIA Number: 22D0960221</b></p>	<p style="text-align: center;"><i>Beatrice O'Keefe</i></p> <p>Beatrice R. O'Keefe, Division Chief Laboratory Field Services</p>