



MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
OFFICE OF HEALTH CARE QUALITY

SPRING GROVE CENTER
BLAND BRYANT BUILDING
55 WADE AVENUE
CATONSVILLE, MD 21228-4663

TISSUE BANK PERMIT

NUMBER: TB2059 EFFECTIVE PERIOD: 07/01/2015 - 06/30/2017

*Pursuant to the provisions of TITLE 17, subtitle 3, Health-General Article § 17-301 et seq.,
Annotated Code of Maryland, this permit is issued to:*

**NEW YORK BLOOD CENTER, INC
310 EAST 67TH STREET
NEW YORK, NY 10065**

Director: Dr BETH SHAZ

Owner: NEW YORK BLOOD CENTER INC

For operating, representing or servicing the following Tissue Bank Classes:

Blood Bank:
Blood

CONTROL: 61023

Patricia Tomasko May, MD
Director

Falsification of a license shall subject the perpetrator to criminal prosecution and the imposition of civil fines.