

CLINICAL LABORATORY PERMIT



pennsylvania
DEPARTMENT OF HEALTH

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: 28864A

Name and Director of Laboratory:

VERSITI BLOOD HEALTH, INC.
MATTHEW ANDERSON
638 N 18TH STREET
MILWAUKEE, WI 53233

AUTHORIZED CATEGORIES/TESTS:

CLINICAL CHEMISTRY
EXFOLIATIVE CYTOLOGY
HEMATOLOGY
IMMUNOHEMATOLOGY

Owner:

ISSUE DATE: August 15, 2026

DATE EXPIRES: August 15, 2027

Debra L. Bogen MD

Debra L. Bogen, MD, FAAP
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.

VERSITI BLOOD HEALTH, INC.
MATTHEW ANDERSON
638 N 18TH STREET
MILWAUKEE, WI 53233