Dear Laboratory Director:

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

Expiration Date: January 13, 2018

DUPLICATE

RONALD REAGAN UCLA MEDICAL CENTER CLINICAL LABORATORY
10833 LE CONTE AVE
BOX 951713, ROOM A7-246 CHS
LOS ANGELES CA 90095-1713

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 you 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 146 Labcldp (01-17)

State of California Department of Public Health

CLINICAL LABORATORY LICENSE

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 sites on file with the department.

RONALD REAGAN UCLA MEDICAL CENTER CLINICAL LABORATORY
757 WESTWOOD PLAZA, ROOM B403
LOS ANGELES CA 90095

OWNER(S):
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA

DIRECTOR(S):
ZIMAN ALYSSA MD
DRAKE THOMAS MD

Lab ID Number: CLF 00336407
Effective Date: January 14, 2017
Valid Until: January 13, 2018
CLIA Number: 05D1070633

Robert J. Thomas, Chief
Laboratory Field Services