



Dear Tissue Bank Director:

Attached below is your tissue bank license.  
Your license is void after the expiration date.

NOTE: Applications for renewal of license must be filed with the department **not less than 30 days** prior to its expiration date and shall be accompanied by the annual renewal fee. (CA H&S Code §1639.2)

**CALIFORNIA CRYOBANK LLC - SPOKANE**  
**11915 LA GRANGE AVE**  
**ATTN: CHARLOTTE DELANEY**  
**LOS ANGELES CA 90025-5213**

**FORFEITURE OF LICENSE**

A Tissue Bank license shall be forfeited by operation of law prior to its expiration date when one of the following occurs:

- (1) The tissue bank is sold or otherwise transferred.
- (2) The license is surrendered to the state department.

**QUESTIONS AND INFORMATION:**

If you have any questions, please write to:

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH  
 Laboratory Field Services, Tissue Bank Section  
 850 Marina Bay Parkway, Building P, 1<sup>st</sup> Floor  
 Richmond, CA 94804-6403

Internet Address: [www.cdph.ca.gov/LFS](http://www.cdph.ca.gov/LFS)  
 Thank you for your cooperation.

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STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

**TISSUE BANK LICENSE**

In accordance with Division 2, Chapter 4.1, of the Health and Safety Code, the entity named below is hereby licensed to engage in the listed tissue bank operation(s) at the indicated facility address.

**CALIFORNIA CRYOBANK LLC - SPOKANE**

**201 W. NORTH RIVER DR. STE 110**

**SPOKANE WA 99201**

**OWNER(S):**

CALIFORNIA CRYOBANK LLC  
 GENERATE LIFE SCIENCES INC  
 THE COOPER COMPANIES, INC

**DIRECTOR:**

MICHAEL BAUER MD

**TISSUE BANK ID Number: CTB 00080402**

**Issuance Date: December 17, 2023**

**Expiration Date: December 15, 2024**

*Robert J. Thomas*

Robert J. Thomas, Branch Chief  
 Laboratory Field Services