Dear Licensee:
Attached below is your license for the production of Biologics. Your license is void after the expiration date below.

NOTE: Application for renewal of license must be filed with the department not less than 10 days prior to its expiration date and shall be accompanied by the annual renewal fee. Failure to make a timely renewal shall result in expiration of the license.

STANFORD-TRANSFUSION SERV
500 PASTEUR DRIVE, ROOM J040
STANFORD, CA 94305

OFFSITE DISTRIBUTION:
9474.001 MED ONCOLOGY & INFUSION SERV —— PALO ALTO, CA
9474.002 STANFORD MEDICINE OUT CTR —— REDWOOD CITY, CA
9474.003 STANFORD HEALTH CARE —— SAN JOSE, CA
9474.004 NEUROSCIENCE HEALTH CTR —— PALO ALTO, CA

California Health and Safety Code, Section 1615. Automatic revocation; new license prior to change; proceedings for denial.
(e) A license shall be automatically revoked when there is a change of address, ownership, or person in charge of biologics production. However, a new license may be secured for the new location, owner or person in charge prior to the actual change, provided the contemplated change is in compliance with all the provisions of this chapter, and regulations pertaining thereto.
(b) Proceedings for denial of license shall be conducted in accordance with Chapter 5 (commencing with Section 11500), Part 1, Division 3, Title 2 of the Government Code.

QUESTIONS AND INFORMATION:
If you have any questions, please write to:
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
Laboratory Field Services, Biologics
850 Marina Bay Parkway, Bldg. P-1st Floor
Richmond, CA 94804
Email: LFSBiologics@cdph.ca.gov

STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC HEALTH
LICENSE FOR THE PRODUCTION OF BIOLOGICS
In accordance with Division 2, Chapter 4 of the Health and Safety Code, the entity named below is hereby licensed to engage in the production of human whole blood or blood components at the indicated address and its blood collection centers and/or mobile units.

STANFORD-TRANSFUSION SERVICE
500 PASTEUR DRIVE, ROOM J040
STANFORD, CA 94305

OWNER(S):
STANFORD HEALTH CARE

9474
BLOOD BANK ID NUMBER
November 17, 2021
EXPIRATION DATE
November 18, 2020
ISSUANCE DATE

MEDICAL DIRECTOR(S):
HUA SHAN, M.D.
MARIE HOLLENHORST, M.D.

PRODUCTS PRODUCED AND REPORTED TO LABORATORY FIELD SERVICES

| CRYOPRECIPITATED AHF - POOLED |
| PLASMA - THAWED (5-DAY) |
| RBCs - WASHED |
| PLATELETS PHERESIS - PACKED |
| PLATELETS PHERESIS - WASHED |
| PLATELETS PHERESIS - DIVIDED |
| RBCs, DIVIDED |
| PLASMA - DIVIDED |
| THAWED SINGLE CRYO |

Robert J. Thomas
Branch Chief, Laboratory Field Services