



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)

NEW ENGLAND CRYOGENIC CENTER, INC.  
500 DONALD LYNCH BLVD  
ATTN: BRAD BLANEY  
MARLBOROUGH MA 01752-4716

#### **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 operations at the indicated facility address.

NEW ENGLAND CRYOGENIC CENTER, INC.

500 DONALD LYNCH BLVD  
MARLBOROUGH MA 01752

#### OWNER(S):

NEW ENGLAND CRYOGENIC CENTER, INC  
CATHERINE R. RIZZA  
JOSEPH A. RIZZA

#### DIRECTOR(S):

GRACE M. CENTOLA PHD

TISSUE BANK ID Number: CTB 00080400

Issuance Date: December 31, 2019

Expiration Date: December 29, 2020

*Robert J. Thomas*

Robert J. Thomas, Acting Branch Chief  
Laboratory Field Services