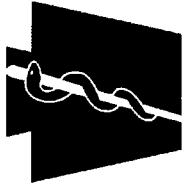


CLINICAL LABORATORY PERMIT



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: 20506A

Name and Director of Laboratory:

CENTRAL PA ALLIANCE LABORATORY
PETER C COTE
1803 MT ROSE AVENUE SUITE C3-C4
YORK, PA 17403

Owner:

CENTRAL PA HOSPITAL ALLIANCE

ISSUE DATE: August 15, 2017

DATE EXPIRES: August 15, 2018

AUTHORIZED CATEGORIES/TESTS:

BACTERIOLOGY
CLINICAL CHEMISTRY
IMMUNOHEMATOLOGY
NON-SYPHILIS SEROLOGY
SYPHILIS SEROLOGY
TOXICOLOGY - BLOOD LEAD

Karen M. Murphy Ph.D. RN
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.