

CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS
CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS
FLORIDA'S BLOOD CENTERS INC
MARION COUNTY BRANCH
1051 SW 1ST AVE
OCALA, FL 34474-4220

LABORATORY DIRECTOR
RICHARD R GAMMON MD

CLIA ID NUMBER
10D0272775

EFFECTIVE DATE
07/27/2007

EXPIRATION DATE
07/26/2009

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.



A handwritten signature in dark ink, appearing to read "Judith A. Yost".

Judith A. Yost, Director
Division of Laboratory Services
Survey and Certification Group
Center for Medicaid and State Operations