



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)

**SOLVITA - TOLEDO**  
2900 COLLEGE DR  
ATTN: PATTY MALONE  
KETTERING OH 45420-2972

**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.

**SOLVITA - TOLEDO**  
**2736 NORTH HOLLAND-SYLVANIA ROAD**  
**TOLEDO OH 43615**

**OWNER(S):**  
COMMUNITY BLOOD CENTER

**DIRECTOR:**  
DIANE WILSON

**TISSUE BANK ID Number: CTB 00081221**

**Issuance Date: December 20, 2023**

**Expiration Date: December 18, 2024**

*Robert J. Thomas*

Robert J. Thomas, Branch Chief  
Laboratory Field Services