Dear Laboratory Director:

Attached below is your clinical laboratory license.
Your license is void after the expiration date below.

Expiration Date: January 4, 2019

BEACON DIAGNOSTICS LABORATORY
124 BERNARD E SAINT JEAN
EAST FALMOUTH MA 02536-4445

DISPLAY:
State law requires that the clinical laboratory license shall be conspicuously posted in the clinical laboratory.

CHANGE OF LABORATORY NAME, DIRECTOR, OWNER AND/OR ADDRESS:
State law requires that the laboratory owner and/or the director notify this office within 30 days of any change in ownership, name, location, or laboratory directors. **YOUR LICENSE ALSO WILL BE AUTOMATICALLY REVOKED 30 DAYS AFTER A MAJOR OWNER AND/OR DIRECTOR CHANGE.**
You must submit a completed application for a new clinical laboratory license or registration within those 30 days or cease engaging in clinical laboratory practice. Mail written notification and/or application to the address indicated below.

California Department of Public Health
Laboratory Field Services, Facility Licensing Section
850 Marina Bay Parkway, Building P, 1st Floor
Richmond, CA 94804-6403

Thank you for your cooperation.

Lab 142 Labclin (01-17)

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State of California Department of Public Health

CLINICAL LABORATORY LICENSE

In accordance with the provisions of Chapter 3, Division 2 of the Business and Professions Code, the persons named below are hereby issued a license authorizing operation of a clinical laboratory at the indicated address or other site(s) on file with the department.

BEACON DIAGNOSTICS LABORATORY
124 BERNARD E SAINT JEAN DRIVE
EAST FALMOUTH MA 02536

OWNER(S):
ASSOCIATES OF CAPE COD, INC.
SEIKAGAKU CORPORATION

DIRECTOR(S):
PATRICIA DEVINE MD

Lab ID Number: COS 00800172
Effective Date: January 05, 2018
Valid Until: January 04, 2019
CLIA Number: 22D1021258

Robert J. Thomas

Robert J. Thomas, Chief
Laboratory Field Services