

# NEW YORK STATE DEPARTMENT OF HEALTH

## LICENSE FOR TISSUE BANK OPERATION

Issued in accordance with and pursuant to section 4364 Public Health Law of New York State

*Facility ID: 854*

**Tissue Bank Director:**

**Joey R. Manhein**

**Medical Director:**

**Harvey J. Stern, MD, PhD**

**Fairfax Cryobank, Inc. - Austin**

**1305 W 34th Street, Suite 210**

**Austin, TX 78705**

**is hereby APPROVED as a Tissue Bank for the following categories of service:**

**Comprehensive Tissue Procurement Service**

**Tissue Processing Facility**

**Tissue Storage Facility**

**Male reproductive tissue**

**Male reproductive tissue**

**Reproductive tissue**

**Issued: March 31, 2026**

**Expires: April 1, 2028**

**Owner: Genetics & IVF Institute, Inc.**

Property of the New York State Department of Health. Valid only at the address shown. Must be conspicuously posted.

DOH-3908 (04/2001)