

# NEW YORK STATE DEPARTMENT OF HEALTH

## PROVISIONAL LICENSE FOR TISSUE BANK OPERATION

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

*Tissue Bank ID No.: 854*

**Tissue Bank Director:**

**Michelle Ottey, Ph.D., HCLD**  
**Laboratory Director**

**Medical Director:**

**Harvey J. Stern, M.D., Ph.D.**

**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

Semen from donors and client-depositors  
Semen from donors and client-depositors  
Semen, oocytes, embryos, ovarian tissue, and testicular tissue from donors and client-depositors

**Issued: December 6, 2019**

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

**Expires: January 1, 2022**

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

DOH-3908 (04/2001)