

CLINICAL LABORATORY PERMIT



pennsylvania
DEPARTMENT OF HEALTH

Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:

Laboratory Identification Number: **29942A**

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

TISSUE PATHOLOGY

Cytogenetics

**GENETICS ASSOCIATES INC
VG DEV
1916 PATTERSON STREET SUITE 400
NASHVILLE, TN 37203**

Owner:

VG DEV & JESSE GORE

ISSUE DATE: August 15, 2020

DATE EXPIRES: August 15, 2021

**Rachel L. Levine, MD
Secretary of Health**

DISPLAY THIS CERTIFICATE PROMINENTLY

This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.