



This certificate or a duplicate thereof, must be conspicuously displayed at each place where you practice.



Change of Name or Address:

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Service provided by:

California Department of Public Health <u>Laboratory Field Services</u>

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THIS LICENSE IS ISSUED PURSUANT TO DIVISION 2, CHAPTER 3 OF THE CALIFORNIA BUSINESS AND PROFESSIONS CODE, TO AUTHORIZE

SOPHIA DWANNA STEWART PHD

TO ENGAGE IN CLINICAL LABORATORY PRACTICE IN ACCORDANCE WITH THE CLINICAL LABORATORY TECHNOLOGY LAWS AND REGULATIONS OF DIVISION 2, CHAPTER 3, OF THE CALIFORNIA BUSINESS AND PROFESSIONS CODE.



DRM-00000021

LICENSE NUMBER

START DATE: August 09, 2024 EXPIRATION DATE: August 08, 2026

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ROBERT J. THOMAS
BRANCH CHIEF
LABORATORY FIELD SERVICES

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