

COMMONWEALTH OF KENTUCKY

KENTUCKY BOARD OF PHARMACY
State Office Bldg. Annex Third Floor Suite 300
125 Holmes Street
Frankfort, Kentucky 40601

LICENSE / PERMIT: Wholesaler/Manufacturer

EFFECTIVE DATE: 07/05/2011

NUMBER: W02815

EXPIRATION DATE: 09/30/2017

PIC:

Issued to:

COMMUNITY BLOOD CENTER
349 SOUTH MAIN STREET
DAYTON, OH 45402

ISSUED PURSUANT TO KRS CHAPTER 315

MUST BE CONSPICUOUSLY DISPLAYED

KENTUCKY BOARD OF PHARMACY
PHARMACIST ID

LICENSE NUMBER:

Not Applicable

(Not valid unless signed)

Pursuant to KRS 315.

Expires:

CUT HERE

CUT HERE

MAILING ADDRESS