



**MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
OFFICE OF HEALTH CARE QUALITY**

SPRING GROVE CENTER
BLAND BRYANT BUILDING
55 WADE AVENUE
CATONSVILLE, MD 21228-4663

TISSUE BANK PERMIT

NUMBER: TB602 EFFECTIVE PERIOD: 07/01/2010 - 06/30/2011

*Pursuant to the provisions of TITLE 17, subtitle 3, Health-General Article § 17-301 et seq.,
Annotated Code of Maryland, this permit is issued to:*

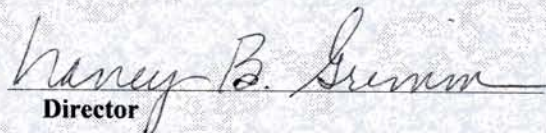
**Blood Bank Of Delmarva, INC
1309 MT HERMON RD
SALISBURY, MD 21804**

**Director: Dr SCOTT HALL
Owner: ROBERT L TRAVIS**

For operatng, representing or servicing the following Tissue Bank Classes:

**Blood Bank:
Blood**

CONTROL: 41093


Director

Falsification of a license shall subject the perpetrator to criminal prosecution and the imposition of civil fines.