

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: 36043

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

**NON-SYPHILIS SEROLOGY
TISSUE PATHOLOGY**

**H. LEE MOFFITT CANCER CENTER & RESEARCH INS
HOSP, INC
LYNN C. MOSCINSKI, M.D.
12902 MAGNOLIA DRIVE
TAMPA, FL 33612**

Owner:

**H. LEE MOFFITT CANCER CENTER & RESEARCH INSTITUTE,
INC**

ISSUE DATE: August 15, 2019

DATE EXPIRES: August 15, 2020

**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.