

CENTERS FOR MEDICARE & MEDICAID SERVICES  
 CLINICAL LABORATORY IMPROVEMENT AMENDMENTS  
**CERTIFICATE OF COMPLIANCE**

LABORATORY NAME AND ADDRESS  
 LIFELINK FOUNDATION INC D/B/A  
 LIFELINK TRANSPLANTATION IMMUNOLOGY LA  
 9661 DELANEY CREEK BLVD  
 TAMPA, FL 33619

CLIA ID NUMBER  
 10D0645555

EFFECTIVE DATE  
 06/09/2021

LABORATORY DIRECTOR  
 JOHN G LUNZ III Ph.D.

EXPIRATION DATE  
 06/08/2023

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.



*Monique Spruill*  
 Monique Spruill, Director  
 Division of Clinical Laboratory Improvement & Quality  
 Quality & Safety Oversight Group  
 Center for Clinical Standards and Quality

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If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

<u>LAB CERTIFICATION (CODE)</u>	<u>EFFECTIVE DATE</u>
HISTOCOMPATIBILITY (010)	06/09/1993
SYPHILIS SEROLOGY (210)	06/09/1993
GENERAL IMMUNOLOGY (220)	06/09/1993
ABO & RH GROUP (510)	12/10/2004

LAB CERTIFICATION (CODE)      EFFECTIVE DATE



FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT [WWW.CMS.GOV/CLIA](http://WWW.CMS.GOV/CLIA)  
 OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR  
 YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER.  
 PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.