

State of Tennessee



DEPARTMENT OF HEALTH

License No. 0000004398

This I, Dr. Verity, that a license is hereby granted by the Tennessee Department of Health to:
MEDIC REGIONAL BLOOD CENTER - CROSSVILLE

Medical Laboratory Director THOMAS C. WATKINS, D.O.

Company CORPORATION

To conduct and maintain a Medical Laboratory in the Specialty (ies) of:
HEMOGLOBIN

On the premises located at 79 S MAIN ST, CROSSVILLE, TN 38555-4519
County of CUMBERLAND

This license shall expire JANUARY 31 2020.

This license shall be displayed in a conspicuous place where it may be viewed by the public. The holder of this license is subject to the provisions of T.R.C. Section 68-29-111 and regulations thereto. This license shall not be assignable or transferable and shall be subject to revocation at any time by the State Department of Health for failure to comply with the laws of the State of Tennessee or the rules and regulations of the State Department of Health issued hereunder.

In Witness Whereof, we have hereunto set our hand and seal of the State
this 18TH day of JANUARY 2019.



By Liana E. Gardner
INTERIM DIRECTOR, HEALTH RELATED BOARDS

By David Q. Watson MHA, MT (ASCP)
CHAIRMAN, MEDICAL LABORATORY BOARD
By [Signature]
COMMISSIONER, DEPARTMENT OF HEALTH