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Effective Date: **May 1, 2021**

Expires: May 01, 2022

**Thomas A. Cycyota, Facility Director**

**AlloSource**

**615 Elsinore Place, Suite 220**

**Cincinnati, OH 45202**

**Registration Number 1916**

*State of Illinois*  
*2021*  
*Sperm/Tissue Bank Registration*  
**AlloSource**

Dear Director:

We are in receipt of your **Registration** with the State of Illinois. We welcome your cooperation to observe our State laws and you may use this document as proof of registration as required by *Title 77 Public Health Chapter I: Department of Public Health Subchapter D: Laboratories and Blood Bank Part 470 Sperm Bank and Tissue Bank Code Section 470.30 Registration Requirements.*

Sincerely,



**Brandon Rakowski**

*Tissue & Sperm Bank*

*Program Administrator*

*Illinois Department of Public Health*

*Health Care Facilities and Programs*

*Laboratory Regulations*

*Annual registration deadline is May 1, and renewal reminders are e-mailed on February of each year.*

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