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Effective Date: **May 1, 2018**

Expires: **May 01, 2019**

Grace M. Centola, Ph.D., Sperm Bank Director  
MANHATTAN CRYOBANK  
211 E. 43rd Street, Suite 1701  
New York, NY 10017

Registration Number **0315**

*State of Illinois*  
**2018**  
*Sperm And Tissue*  
**Establishment Registration**

# MANHATTAN CRYOBANK

Dear Director:

We are in receipt of your 2018 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,



**Juan Garcia**  
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.*