



MARYLAND  
DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
OFFICE OF HEALTH CARE QUALITY

SPRING GROVE CENTER  
BLAND BRYANT BUILDING  
55 WADE AVENUE  
CATONSVILLE, MD 21228-4663

**TISSUE BANK PERMIT**

NUMBER: TB699      EFFECTIVE PERIOD: 07/01/2011 - 06/30/2012

*Pursuant to the provisions of TITLE 17, subtitle 3, Health-General Article § 17-301 et seq.,  
Annotated Code of Maryland, this permit is issued to:*

**FAIRFAX CRYOBANK**  
**3015 WILLIAMS DRIVE STE 110**  
**FAIRFAX, VA 22031**

**Director: Dr HARVEY STERN**

**Owner: GENETICS \* IVF OFFICERS/DIRECTORS/STOCK HOLDERS**

*For operating, representing or servicing the following Tissue Bank Classes:*

**Reproductive Tissue Bank:**

Embryo, Ovarian Tissue, Reproductive Tissue, Sperm, Testicular Tissue

*Nancy B. Grimm*

**CONTROL: 46110**

Director

*Falsification of a license shall subject the perpetrator to criminal prosecution and the imposition of civil fines.*