

# CLINICAL LABORATORY PERMIT



**pennsylvania**  
DEPARTMENT OF HEALTH

*Pursuant to the act of September 26, 1951, P.L. 1539 as amended, a Permit to operate a Clinical Laboratory is hereby granted to:*

**Laboratory Identification Number: 38466**

**AUTHORIZED CATEGORIES/TESTS:**

**VIROLOGY**

**Name and Director of Laboratory:**

**EUROFINS VIRACOR  
R. BROCK NEIL, PH.D.  
951 NW TECHNOLOGY DRIVE**

**LEE'S SUMMIT, MT 64086**

**Owner:**

**EUROFINS PHARMA US HOLDINGS II, INC.**

**ISSUE DATE: August 15, 2021**

**DATE EXPIRES: August 15, 2022**

**Allison V. Beam  
Secretary of Health**

**DISPLAY THIS CERTIFICATE PROMINENTLY**

**This permit is subject to revocation, suspension, or limitation for violation of the Act or the Regulations promulgated thereunder.**

**EUROFINS VIRACOR  
R. BROCK NEIL, PH.D.  
951 NW TECHNOLOGY DRIVE**

**LEE'S SUMMIT, MT 64086**