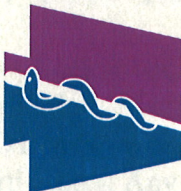


# CLINICAL LABORATORY PERMIT



**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: 027845A

Name and Director of Laboratory:

CLINICAL REFERENCE LABORATORY  
ROBERT L. STOUT, PHD  
8433 QUIVIRA ROAD  
LENEXA, KS 66215

Owner:

CLINICAL REFERENCE LAB CORPORATION

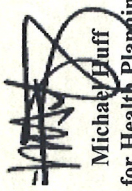
Issued: August 11, 2009

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


DATE EXPIRES: August 15, 2010

**AUTHORIZED CATEGORIES:**

- CLINICAL CHEMISTRY
- HEMATOLOGY
- NON-SYPHILIS SEROLOGY
- SYPHILIS SEROLOGY
- TOXICOLOGY - BLOOD LEAD
- TOXICOLOGY - DRUGS URINE CONFIRMATORY
- TOXICOLOGY - DRUGS URINE SCREENING
- TOXICOLOGY - ERYTHROCYTE PROTOPORPHYRIN



Michael Huff  
Deputy Secretary for Health Planning and Assessment



Everette James  
Secretary of Health

DISPLAY THIS CERTIFICATE PROMINENTLY