

# COMMONWEALTH OF KENTUCKY

## KENTUCKY BOARD OF PHARMACY

State Office Bldg. Annex Third Floor Suite 300

125 Holmes Street

Frankfort, Kentucky 40601

LICENSE / PERMIT: **Wholesaler/Manufacturer**

EFFECTIVE DATE: **07/05/2011**

NUMBER: **W02815**

EXPIRATION DATE: **09/30/2011**

PIC:

Issued to:

COMMUNITY BLOOD CENTER  
349 SOUTH MAIN STREET  
DAYTON, OH 45402-

## KENTUCKY BOARD OF PHARMACY PHARMACIST ID

LICENSE NUMBER:  
**Not Applicable**

(Not valid unless signed)  
Pursuant to KRS 315. Expires:

ISSUED PURSUANT TO KRS CHAPTER 315

MUST BE CONSPICUOUSLY DISPLAYED