

# 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:** 32379

**Name and Director of Laboratory:**

**PRECIPIO DIAGNOSTICS, LLC  
FRANK BAUER, M.D.  
4 SCIENCE PARK, 3RD FLOOR  
NEW HAVEN, CT 06511**

**AUTHORIZED CATEGORIES/TESTS:**

**CLINICAL CHEMISTRY  
HEMATOLOGY  
NON-SYPHILIS SEROLOGY  
TISSUE PATHOLOGY**  
Cytogenetics

**Owner:**

**ILAN DANIELI, CEO**

**ISSUE DATE:** August 15, 2024

**DATE EXPIRES:** August 15, 2025

*Debra L. Bogen MD*

**Debra L. Bogen, MD, FAAP  
Acting 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.**