

# 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: 34727

AUTHORIZED CATEGORIES/TESTS:

Name and Director of Laboratory:

CLINICAL CHEMISTRY

TISSUE PATHOLOGY

Cytogenetics

COLOR GENOMICS, INC  
SCOTT TOPPER, PH.D.  
863A MITTEN ROAD, SUITE 100F  
BURLINGAME, CA 94010

Owner:

ELAD GIL, OTHMAN LARAKI, TAYLOR SITTLER

ISSUE DATE: August 15, 2020

DATE EXPIRES: August 15, 2021

Rachel L. Levine, MD  
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.

**COLOR GENOMICS, INC  
SCOTT TOPPER, PH.D.  
1801 MURCHISON DRIVE, SUITE 128  
BURLINGAME, CA 94010**