CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF ACCREDITATION

LABORATORY NAME AND ADDRESS

VERINATA HEALTH DBA ILLUMINA 200 LINCOLN CENTRE DR FOSTER CITY, CA 94404

CLIA ID NUMBER 05D2013691

EFFECTIVE DATE

08/24/2021

EXPIRATION DATE

08/23/2023

LABORATORY DIRECTOR

STEWART W COMER M.D.

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.



Division of Clinical Laboratory Improvement & Quality

Quality & Safety Oversight Group Center for Clinical Standards and Quality

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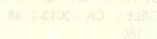
If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

LAB CERTIFICATION (CODE) **EFFECTIVE DATE**

ROUTINE CHEMISTRY (310)

08/24/2011

LAB CERTIFICATION (CODE) EFFECTIVE DATE







FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER. PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.

CLIA ID Number: 05D2013691 VERINATA HEALTH DBA ILLUMINA 200 LINCOLN CENTRE DR FOSTER CITY, CA 94404

STATE AGENCY ADDRESS AND PHONE NUMBER:

CA DHS/LABORATORY FIELD SERVICES DIVISION OF LABORATORY SCIENCE AND BUILDING BALL 320 WEST 4TH STREET SUITE 890 LOS ANGELES, CA 90013-2398 (213)620-6160

LABORATORY MAILING ADDRESS: