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Effective Date: **May 1, 2024**

Expires: **May 01, 2025**

**Aron Bastuba, MD., Facility Director**  
**Family Fertility Cryobank**  
6699 Alvarado Road, Suite 2208  
San Diego, CA 92120

Registration Number **0316**

*State of Illinois*  
2024  
*Sperm/Tissue Bank Registration*

# Family Fertility Cryobank

Dear Director:

We are in receipt of your **Registration** with the State of Illinois. We welcome your cooperation to observe our State laws and you may use this document as proof of registration as required by *Title 77 Public Health Chapter I: Department of Public Health Subchapter D: Laboratories and Blood Bank Part 470 Sperm Bank and Tissue Bank Code Section 470.30 Registration Requirements.*

Sincerely,



**Brandon Rakowski**  
*Tissue & Sperm Bank  
Program Administrator  
Illinois Department of Public Health  
Health Care Facilities and Programs  
Laboratory Regulations*

*Annual registration deadline is May 1, and renewal reminders are e-mailed on February of each year.*