**LEGAL NAME AND LOCATION:**
Community Blood Bank of Erie County  
2646 Peach Street  
Erie, PA 16508 USA

814-456-4206

**REPORTING OFFICIAL:**
Kristin Kramer, Quality Assurance Director  
Community Blood Bank of Erie County  
2646 Peach Street  
Erie, PA 16508 USA  
814-456-4206 x135  
kristin.kramer@fourhearts.org

**OTHER NAMES USED IN THIS LOCATION:**
Community Blood Bank of Northwest Pennsylvania; Community Blood Bank of Western New York

**TYPE OF OWNERSHIP:**
CORPORATION

**DONOR/RECIPIENT RELATIONSHIP:**
ALLOGENIC, AUTOLOGOUS, DIRECTED

<table>
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<tr>
<th>PRODUCT</th>
<th>COLLECT</th>
<th>MANUAL APHERESIS</th>
<th>AUTOMATED APHERESIS</th>
<th>PREPARE</th>
<th>LEUKOCYTES REDUCED</th>
<th>IRRADIATED</th>
<th>DONOR RETESTED</th>
<th>TEST</th>
<th>STORE AND DISTRIBUTE TO OTHERS</th>
<th>BACTERIAL TESTING</th>
<th>PATHOGEN REDUCED</th>
<th>POOLED</th>
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FDA information collection OMB Control number: 0910-0052, Expiration Date: 6/30/2021
DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION
BLOOD ESTABLISHMENT REGISTRATION AND PRODUCT LISTING FOR
MANUFACTURERS OF BLOOD PRODUCTS AND LICENSED DEVICES

FEI: 2572105
DUNS: 043551308
U.S. License Number: 983
REASON FOR SUBMISSION
Annual Registration

DISTRIBUTION OFFICE: Philadelphia
VALIDATED BY FDA: 11/12/2018

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BACTERIAL TESTING
PATHOGEN REDUCED
POOLED

PLASMA CRYOPRECIPITATED REDUCED
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X

RECOVERED PLASMA
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***** End Of Report *****

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