



MARYLAND  
DEPARTMENT OF HEALTH  
OFFICE OF HEALTH CARE QUALITY

LABORATORIES AND TISSUE BANKS  
55 WADE AVE BLAND BRYANT BLDG  
CATONSVILLE, MD 21228-4663

**TISSUE BANK PERMIT**  
**NON - EXPIRING**

NUMBER: TB2004      EFFECTIVE DATE: 07/01/2018

*Pursuant to the provisions of TITLE 17, subtitle 3, Health-General Article § 17-301 et seq.,  
Annotated Code of Maryland, this permit is issued to:*

**Saving Sight**  
**10560 N AMBASSADOR DRIVE SUITE 210**  
**KANSAS CITY, MO 64153**

**Director: Dr JOSEPH TAUBER**

**Owner: MISSOURI LIONS EYE RESEARCH FOUNDATION**

*For operating, representing or servicing the following Tissue Bank Classes:*

Eye Bank:  
Eye

CONTROL: 74878

*Patricia Tomsko May MD*  
Director

*Falsification of a license shall subject the perpetrator to criminal prosecution and the imposition of civil fines.*



525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • [www.dph.illinois.gov](http://www.dph.illinois.gov)

Effective Date: **May 01, 2020**

Expires: **May 01, 2021**

Tina Livesay, Facility Director  
Saving Sight  
1027 Junction Circle  
Springfield, IL 62704

Registration Number **0904**

*State of Illinois*  
**2020**  
*Sperm And Tissue*  
**Establishment Registration**

# **Saving Sight**

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,



**Juan Garcia**  
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.*

**NEW YORK STATE DEPARTMENT OF HEALTH  
PROVISIONAL LICENSE FOR TISSUE BANK OPERATION**

Issued in accordance with and pursuant to section 4364 Public Health Law of New York State

*Tissue Bank ID No.: 2274*

**Tissue Bank Director:  
Antonio J. Bavuso, BA, CEBT**

**Medical Director:  
Joseph Tauber, M.D.**

**Saving Sight  
10560 North Ambassador Drive, Suite 210  
Kansas City, MO 64153**

is hereby **APPROVED** as a Tissue Bank for the following categories of service:

Comprehensive Tissue Procurement Service	Eye tissue
Tissue Processing Facility	Eye tissue

**Issued: April 8, 2020**

**Owner: Saving Sight**

**Expires: May 1, 2022**

Property of the New York State Department of Health. Valid only at the address shown. Must be conspicuously posted.

DOH-3908 (04/2001)



**NEW YORK STATE DEPARTMENT OF HEALTH  
PROVISIONAL LICENSE FOR TISSUE BANK OPERATION**

Issued in accordance with and pursuant to section 4364 Public Health Law of New York State

*Tissue Bank ID No.: 2466*

**Director:**

**Antonio J. Bavuso, BA, CEBT**

*Saving Sight*

**10560 North Ambassador Drive, Suite 210**

**Kansas City, MO 64153**

**Article 43B Responsibility:**

**Patrick Johnson**

**Director of QI and RA**

**is hereby APPROVED as a Nontransplant Anatomic Bank**

**Nontransplant Anatomic Bank**

**Eye tissue**

**Issued: April 17, 2020**

**Owner: Saving Sight**

**Expires: May 1, 2022**

**Property of the New York State Department of Health. Valid only at the address shown. Must be conspicuously posted.**

DOH-3908 (04/2001)



Dear Tissue Bank Director:

Attached below is your tissue bank license.  
Your license is void after the expiration date.

NOTE: Applications for renewal of license must be filed with the department **not less than 30 days** prior to its expiration date and shall be accompanied by the annual renewal fee. (CA H&S Code §1639.2)

**SAVING SIGHT**  
10560 N AMBASSADOR DR STE 210  
ATTN: PATRICK JOHNSON  
KANSAS CITY MO 64153-1591

**FORFEITURE OF LICENSE**

A Tissue Bank license shall be forfeited by operation of law prior to its expiration date when one of the following occurs:

- (1) The tissue bank is sold or otherwise transferred.
- (2) The license is surrendered to the state department.

**QUESTIONS AND INFORMATION:**

If you have any questions, please write to:

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH  
Laboratory Field Services, Tissue Bank Section  
850 Marina Bay Parkway, Building P, 1<sup>st</sup> Floor  
Richmond, CA 94804-6403

Internet Address: [www.cdph.ca.gov/LFS](http://www.cdph.ca.gov/LFS)  
Thank you for your cooperation.

TB 100 TB LIC (4-16)

Tear Here

Tear Here

STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

**TISSUE BANK LICENSE**

In accordance with Division 2, Chapter 4.1, of the Health and Safety Code, the entity named below is hereby licensed to engage in the listed tissue bank operation(s) at the indicated facility address.

**SAVING SIGHT**  
**10560 N. AMBASSADOR DR. STE 210**  
**KANSAS CITY MO 64153**

**OWNER(S):**  
MISSOURI LIONS EYE RESEARCH FOUNDATION

**DIRECTOR(S):**  
ANTONIO BAVUSO

**TISSUE BANK ID Number:** CTB 00080510

**Issuance Date:** October 6, 2020

**Expiration Date:** October 5, 2021

Robert J. Thomas, Acting Branch Chief  
Laboratory Field Services





Dear Licensee:  
Attached below is your license for the production of Biologics. Your license is void after the expiration date below.

NOTE: Application for renewal of license must be filed with the department not less than 10 days prior to its expiration date and shall be accompanied by the annual renewal fee. Failure to make a timely renewal shall result in expiration of the license.

**SAVING SIGHT - VITAL TEARS**  
10560 N. AMBASSADOR DR., STE 210  
KANSAS CITY, KS 64153

California Health and Safety Code, Section 1615. Automatic revocation; new license prior to change; proceedings for denial.

(a) A license shall be automatically revoked when there is a change of address, ownership, or person in charge of biologics production. However, a new license may be secured for the new location, owner or person in charge prior to the actual change, provided the contemplated change is in compliance with all the provisions of this chapter, and regulations pertaining thereto.

(b) Proceedings for denial of license shall be conducted in accordance with Chapter 5 (commencing with Section 11500), Part 1, Division 3, Title 2 of the Government Code.

**QUESTIONS AND INFORMATION:**

If you have any questions, please write to:  
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH  
Laboratory Field Services, Biologics  
850 Marina Bay Parkway, Bldg. P-1st Floor  
Richmond, CA 94804  
Email: LFSBiologics@cdph.ca.gov

**OFFSITE COLLECTION:**



**STATE OF CALIFORNIA  
DEPARTMENT OF PUBLIC HEALTH**



**LICENSE FOR THE PRODUCTION OF BIOLOGICS**

In accordance with Division 2, Chapter 4 of the Health and Safety Code, the entity named below is hereby licensed to engage in the production of human whole blood or blood components at the indicated address and its blood collection centers and/or mobile units.

**SAVING SIGHT - VITAL TEARS**

10560 N. AMBASSADOR DR., STE 210  
KANSAS CITY, KS 64153

OWNER(S):

**MISSOURI LIONS EYE RESEARCH  
FOUNDATION**

**9886**

BLOOD BANK ID NUMBER

**December 10, 2021**

EXPIRATION DATE

**December 11, 2020**

ISSUANCE DATE

MEDICAL DIRECTOR(S):

**JOSEPH TAUBER, M.D.**

**PRODUCTS**

AUTOLOGOUS EYE DROPS

*Robert J. Thomas*

Robert J. Thomas  
Branch Chief, Laboratory Field Services



View current license information at: [Floridahealthfinder.gov](http://Floridahealthfinder.gov)

LICENSE #: 283  
CERTIFICATE#: 1715

**State of Florida**  
AGENCY FOR HEALTH CARE ADMINISTRATION  
DIVISION OF HEALTH QUALITY ASSURANCE

# Eye Bank

## Licensed

This is to confirm that Missouri Lions Eye Research Foundation has complied with the rules and regulations adopted by the State of Florida, Agency for Health Care Administration, and authorized in Chapter 765, Florida Statutes, and is authorized to operate the following:

### **SAVING SIGHT**

10560 N Ambassador Dr Ste 200  
Kansas City, MO 64153

Authorized Services: distribute eyes

EFFECTIVE DATE: 01/17/2021

EXPIRATION DATE: 01/16/2023



*Molly McCurdy*  
Deputy Secretary, Division of Health Quality Assurance