



**MARYLAND  
DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
OFFICE OF HEALTH CARE QUALITY**

**SPRING GROVE CENTER  
BLAND BRYANT BUILDING  
55 WADE AVENUE  
CATONSVILLE, MD 21228-4663**

**TISSUE BANK PERMIT**

**NUMBER: TB2479      EFFECTIVE PERIOD: 07/01/2017 - 06/30/2019**

*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:*

**ROCKY MOUNTAIN LIONS EYE BANK  
1675 AURORA COURT EL-2049  
AURORA, CO 80045**

**Director: RICHARD SCOTT DAVIDSON  
Owner: N/A-RMLEB**

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

**Eye Bank:  
Eye**

**CONTROL: 67305**

*Patricia Tomoko May, MD*  
**Director**

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