**LEGAL NAME AND LOCATION:**
Northern Illinois Blood Bank, Inc.
1740 South State Street
Belvidere, IL 61008 USA
815-961-2315

**REPORTING OFFICIAL:**
Cathy P. Midtsem
Northern Illinois Blood Bank, Inc.
419 North Sixth Street
Rockford, IL 61107 USA
815-965-8751 x334
cmidtsem@rrvbc.org

**OTHER NAMES USED IN THIS LOCATION:**
dba/ Rock River Valley Blood Center

**U.S. AGENT:**

**TYPE OF OWNERSHIP:**
CORPORATION

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

**PRODUCT** | **COLLECT** | **MANUAL APHERESIS** | **AUTOMATED APHERESIS** | **PREPARE** | **LEUKOCYTES REDUCED** | **IRRADIATED** | **DONOR RETESTED** | **TEST** | **STORE AND DISTRIBUTE TO OTHERS** | **BACTERIAL TESTING** | **PATHOGEN REDUCED** | **POOLED**
--- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | ---
WHOLE BLOOD | X | | | | | | | | | | |
RED BLOOD CELLS (RBC) | | X | | | | | | | | |
PLATELETS | | X | | | | | | | | | X
PLASMA | | | X | | | | | | | |
PF24 PLASMA | | | | X | | | | | | |
BLOOD PRODUCTS FOR DIAGNOSTIC USE | X | | | | | | | | | |

***** End Of Report *****

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: 3007291280
DUNS: 078578808
U.S. License Number: 249
REASON FOR SUBMISSION: Annual Registration

DISTRIBUTION OF BLOOD PRODUCTS TO OTHERS

DISTRICT OFFICE: Chicago
VALIDATED BY FDA: 11/18/2019

PRODUCTS

WHOLE BLOOD
RED BLOOD CELLS (RBC)
PLATELETS
PLASMA
PF24 PLASMA
BLOOD PRODUCTS FOR DIAGNOSTIC USE

FUNCTIONAL CORRELATION

COLLECT
MANUAL APHERESIS
AUTOMATED APHERESIS
PREPARE
LEUKOCYTES REDUCED
IRRADIATED
DONOR RETESTED
TEST
STORE AND DISTRIBUTE TO OTHERS
BACTERIAL TESTING
PATHOGEN REDUCED
POOLED

FDA information collection OMB Control number: 0910-0052, Expiration Date: 6/30/2021

FEI: 3007291280

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PRINT DATE: 09-JAN-20