**LEGAL NAME AND LOCATION:**
Community Blood Center, Inc.
4406 W. Spencer Street
Appleton, WI 54914-9106 USA

**REPORTING OFFICIAL:**
Jill A. Fonseca
Community Blood Center, Inc.
4406 W. Spencer Street
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920-560-6684
jfonseca@communityblood.org

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**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) | | | | | | | | | | | | |
CRYOPRECIPITATED AHF | | | | | | | | | | | | |
PLATELETS | X | X | X | X | | | | | | | | |
FRESH FROZEN PLASMA | X | | | | | | | | | | | |
PLASMA CRYOPRECIPITATED REDUCED | | | | | | | | | | | | |
LIQUID PLASMA | | | | | | | | | | | | |
RECOVERED PLASMA | | | | | | | | | | | | |
BLOOD PRODUCTS FOR DIAGNOSTIC USE | X | | | | | | | | | | | |
PATHOGEN REDUCTION TECHNOLOGY | | | | | | | | | | | | |
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***** End Of Report *****