

**CENTERS FOR MEDICARE & MEDICAID SERVICES
CLINICAL LABORATORY IMPROVEMENT AMENDMENTS
CERTIFICATE OF COMPLIANCE**

LABORATORY NAME AND ADDRESS
AFFILIATED LABORATORY INC
DBA NORTHERN LIGHT LABORATORY
1250 FOREST AVE, SUITE 101
PORTLAND, ME 04103-1884

CLIA ID NUMBER
20D0649501

EFFECTIVE DATE
08/05/2020

EXPIRATION DATE
08/04/2022

LABORATORY DIRECTOR
MAREK SKACEL MD

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.
This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.



Karen W. Dyer
Karen W. Dyer, Director
Division of Laboratory Services
Survey and Certification Group
Center for Clinical Standards and Quality

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If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

LAB CERTIFICATION (CODE)
URINALYSIS (320)

EFFECTIVE DATE
08/05/1994

LAB CERTIFICATION (CODE)

EFFECTIVE DATE



FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.GOV/CLIA
OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR
YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER.
PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.

CLIA ID Number: 20D0649501

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PORTLAND, ME 04103-1884**

STATE AGENCY ADDRESS AND PHONE NUMBER:

**CLIA LABORATORY PROGRAM
DIVISION OF LICENSING & REGULATORY SERVICES
41 ANTHONY AVE, STATION #11
AUGUSTA, ME 04333-0011
(207)287-9339**

LABORATORY MAILING ADDRESS: