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: 3020470867 DUNS: 118300332 U.S. License Number:	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE:New York  VALIDATED BY FDA: 11/28/2022			
LEGAL NAME AND LOCATION:  Upstate New York Transplant Services, Inc. 135 Main Street Suite C Lockport, NY 14094 USA	REPORTING OFFICIAL: James Bridges, Sr. VP of Quality Upstate New York Transplant So 4444 Bryant and Stratton Way	•	U.S. AGENT:			
7165294293	Williamsville, NY 14221-6013 US 716-529-4321 jbridges@connectlife.org	SA				
OTHER NAMES USED IN THIS LOCATION: d.b.a. ConnectLife	TYPE OF OWNERSHIP: CORPORATION		ESTABLISHMENT TYPE:  COLLECTION FACILITY			
	DONOR/RECIPIENT RELATIO ALLOGENIC	NSHIP:				

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	-	PATHOGEN REDUCED	POOLED
WHOLE BLOOD	Х									·		
RED BLOOD CELLS (RBC)			Х		Х							
PLATELETS PAS (PLATELETS ADDITIVE SOLUTION)			Х		Х							
FRESH FROZEN PLASMA			Х		X							

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