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<th>COLLECT</th>
<th>MANUAL APHERESIS</th>
<th>AUTOMATED APHERESIS</th>
<th>PREPARE</th>
<th>LEUKOCYTES REDUCED</th>
<th>IRRADIATED</th>
<th>DONOR RETESTED</th>
<th>TEST</th>
<th>STORE AND DISTIBUTE TO OTHERS</th>
<th>BACTERIAL TESTING</th>
<th>PATHOGEN REDUCED</th>
<th>POOLED</th>
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</table>

**LEGAL NAME AND LOCATION:**
We Are Blood
4300 North Lamar Boulevard
Austin, TX 78756-3421 USA
512-206-1268

**REPORTING OFFICIAL:**
Wendy Bailey
We Are Blood
4300 N. Lamar Boulevard
Austin, TX 78756-3421 USA
512-206-1134
wbailey@weareblood.org

**OTHER NAMES USED IN THIS LOCATION:**
Central Texas Regional Blood and Tissue Center; We Are Blood

**TYPE OF OWNERSHIP:**
CORPORATION

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

**ESTABLISHMENT TYPE:**
COMMUNITY (NON-HOSPITAL) BLOOD BANK
LEGAL NAME AND LOCATION:  
We Are Blood  
4300 North Lamar Boulevard  
Austin, TX 78756-3421 USA  

512-206-1266

REPORTING OFFICIAL:  
Wendy Bailey  
We Are Blood  
4300 N. Lamar Boulevard  
Austin, TX 78756-3421 USA  
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---|---|---|---|---|---|---|---|---|---|---|---|---|
LIQUID PLASMA | X | X | X | X | X |
RECOVERED PLASMA | X | X | X | X |

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