To: Elizabeth Holmes[eholmes@theranos.com]

Sunny Balwani[/O=THERANOS ORGANIZATION/OU=FIRST ADMINISTRATIVE From:

GROUP/CN=RECIPIENTS/CN=SBALWANI] Tue 6/23/2015 9:25:25 PM (UTC) Sent:

Subject: FW: Director services ending June 30, 2015

Director resignation letter and form 23Jun15.pdf

From: Lynette Sawyer

Sent: Tuesday, June 23, 2015 2:25 PM

To: Sunny Balwani; jerryhurst

Cc: Brad Arington

Subject: Re: Director services ending June 30, 2015

Hi Sunny,

For your records, attached is a copy of the Form 193 and cover letter that was sent to Laboratory Field Services today. As previously agreed, it states that the last day that I will function as a co-director for Theranos is 30 June 2015.

I'm still working my way through the last batch of documents and anticipate finishing them by this weekend.

Regards, Lynette

On Saturday, June 13, 2015 12:48 PM, Sunny Balwani <sbalwani@theranos.com> wrote:

Thanks Jerry and Lynette. Please let us know if anything has changed or changes and Lynette wants to continue working as LD for us.

Thanks.

From: jerryhurst

Sent: Saturday, June 13, 2015 12:39 PM

To: Sunny Balwani Cc: Sawyer, Lynette

Subject: Director services ending June 30, 2015

Hi Sunny:

Just wanted to remind you that Lynette will be ending her co-director duties effective June 30, 2015. We will copy you with the LAB 193 change notification we submit to LFS. Please let me know if you have any questions.

Thank you for allowing us the opportunity to provide these services.

jerry

Jerry W. Hurst

Laboratory Consulting Services, Inc.



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or copying of this message is strictly prohibited. If you are not the intended recipient please inform the sender immediately by reply e-mail and

delete this message from your system. Thank you for your co-operation.

23 June 2015

RE:

Theranos, Inc.

7333 Gateway Blvd. Newark, CA 94560

CLIA ID Number 05D2025714

To Whom It May Concern,

Per the attached Form 193, my final day as co-director for Theranos, Inc. will be 30 June 2015. I will no longer function in that capacity effective 1 July 2015.

Sincerely,

Lynette SW Sawyer, Dr.P.H.

License DRG 00000666



State of California—Health and Human Services Agency

California Department of Public Health Laboratory Field Services



NOTIFICATION OF LABORATORY CHANGE

ate License/Registration #: (CLF, CLA, CLM, CLR,	CLP, COS)	CLF 00341367
LIA ID #: 05D 05D2025714		
aboratory Name: Theranos, Inc.		
aboratory Address: 7333 Gateway Blvd.		
ty, State and Zip Code: Newark, CA 94560		- 31
elephone Number: (650) 838-9292		
ax Number: (650) 838-9165		
mail Address: labsupport@tl	heranos.com	1
Please mail completed form to: California Department of Licensing, 850 Marina Bay Parkway, Bldg P, 1st Floor, R	Public Heal ichmond, C	California 94804-6403.
THIS IS TO REQUEST CERTIFICATE CHANGE:		THIS IS TO INFORM YOU OF A
From:		Change of ownership (See note below)
TO:		✓ Change of Director/Add Director (See not
Certificate of Compliance		Note: Items above may require additional forms. See website www.cdph.ca.gov/lfs
Certificate of Accreditation		for additional information
Note: Proof of accreditation is required.		Change of site address
Provider Performed Microscopy Procedures (PPMP)		Change of laboratory name
Waiver		Change of mailing Address
Cease Testing, specialty, subspecialty and/or test		Change of telephone and/or fax
Closure of the Laboratory	From:	
EFFECTIVE DATE OF CHANGE(S): 07/01/2015		
	To/New:	Removing Lynette Sawyer
		as co-director
ATTENTION: READ THE FOLLO	WING CARE	FILLLY REFORE SIGNING
Pursuant of 42 U.S.C. 263 a (i)(i)(B) and 42 C.F.R. 493.1840(a)(2) your lat within the category of laboratory examinations authorized by your CLIA cermandates of CLIA shall be subject to imprisonment, or fines, or both See	oratory's CLIA tificate Please	certificate may be revoked if the laboratory performs any test be advised that any person who intentionally violates the
If in the future you wish to reapply for a Certificate for moderate or high cor inspection before such testing may begin. This inspection must find the lat C.F.R. Part 493 before the laboratory may resume moderate or high complete.	poratory in comp	you must notify Laboratory Field Services and submit to an pliance with all CLIA condition-level requirements found at 42
For changes in certificate type, your laboratory must pay the appropriate of NOTE: This notification of change form is acceptable.		
Lynette Sawyer, Dr.P.H.		
Name of Director Only (print)		
Synotte SW Sawyer		06/23/2015
Signature of Director		Date

California Department of Public Health, Laboratory Field Services, 850 Marina Bay Parkway, Bldg. P. 1st FL, Richmond, CA 94804-6403 (510) 620 – 3800

Internet Address www.cdph.ca.gov/lfs