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Effective Date: **May 1, 2024**

Expires: **May 01, 2025**

**Rebecca Mateski, Facility Director**  
**Midwest Sperm Bank**  
**4333 Main St.**  
**Downers Grove, IL 60515**

**Registration Number 1216**

*State of Illinois*  
*2024*  
*Sperm/Tissue Bank Registration*

# Midwest Sperm Bank

Dear Director:

We are in receipt of your **Registration** with the State of Illinois. We welcome your cooperation to observe our State laws and you may use this document as proof of registration as required by *Title 77 Public Health Chapter I: Department of Public Health Subchapter D: Laboratories and Blood Bank Part 470 Sperm Bank and Tissue Bank Code Section 470.30 Registration Requirements*.

Sincerely,



**Brandon Rakowski**  
*Tissue & Sperm Bank*  
*Program Administrator*  
*Illinois Department of Public Health*  
*Health Care Facilities and Programs*  
*Laboratory Regulations*

*Annual registration deadline is May 1, and renewal reminders are e-mailed on February of each year.*

**PROTECTING HEALTH. IMPROVING LIVES**

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 PUBLIC HEALTH SERVICE  
 FOOD AND DRUG ADMINISTRATION  
**ESTABLISHMENT REGISTRATION AND LISTING FOR HUMAN CELLS,  
 TISSUES, AND CELLULAR AND TISSUE-BASED PRODUCTS**  
 DESCRIBED IN 21 CFR 1271.10

FEI: 3004743932

Other FDA Registrations:  
 Blood:  
 Devices:  
 Drugs:

Reason For Last Submission: Annual Registration/Listing  
 Last Annual Registration Year: 2024  
 Last Registration Receipt Date: 11/20/2023  
 Summary Report Print Date: 12/01/2023

**Legal Name and Location:**

Midwest Sperm Bank, LLC  
 4334 Highland Avenue

Downers Grove, Illinois 60515  
 USA

Phone: 630-810-0217

Ex1:

**Reporting Official:**

Rebecca L Matecki, Laboratory Director  
 4334 Highland Avenue  
 Downers Grove, Illinois 60515  
 USA  
 Phone: 630-810-0217 Ex1  
 msbdqz@gmail.com

Satellite Recovery Establishment: No  
 Parent Manufacturing Establishment FEI No.:  
 Testing For Micro-Organisms Only: No

Note: FDA acceptance of an establishment registration and HCT/P listing does not constitute a determination that an establishment is in compliance with applicable rules and regulations or that the HCT/P is licensed or approved by FDA (21 CFR 1271.27(b)).

HCT/P(s)	Donor Type(s)	Establishment Functions							Date of Discontinuance	Date of Resumption	Proprietary Name(s)
		Recover	Screen	Donor Testing	Package	Process	Store	Label			
Amniotic Membrane											
Blood Vessel											
Bone											
Cardiac Tissue - non-valved											
Cartilage											
Cornua											
Dura Mater											
Embryo											
Fascia											
Heart Valve											
HPC Apheresis											
HPC Cord Blood											
Ligament											
Nerve Tissue											
Oocyte											
Ovarian Tissue											
Pancreatic Islet Cells - autologous											
Parathyroid											
Pericardium											
Peripheral Blood Mononuclear Cells											
Peritoneal Membrane											
Sclera											
Semen	Anonymous, Directed, SIP	X	X		X	X	X	X	X		
Skin											
Tendon											
Testicular Tissue											
Tooth Pulp											
Umbilical Cord Tissue											

3004743932

FDA information collection OMB Control number: 0910-0543, expiration date: 09/31/2026

Legal Name:

Midwest Sperm Bank, LLC