

Request for Access to Personal Information

You have the right to request information regarding your personal information and how it is being processed by NeoGenomics.

We will do our best to respond promptly and in any event within one month of the following:

- Our receipt of your request; or
- Our receipt of any further information we may ask you to provide to enable us to comply with your request, which ever happens to be later.

The information you supply in this form will only be used to process your request. You are not obliged to complete this form to make a request, but doing so will make it easier for us to process your request quickly.

To submit your request, please complete this form and return to:

NeoGenomics Laboratories, Attn: Compliance & Ethics Department, 9490 NeoGenomics Way, Fort Myers, FL 33912 Fax # 844) 890 - 9650; compliance@neogenomics.com

PLEASE INCLUDE A COPY OF A GOVERNEMENT ISSUED IDENTIFICATION (DRIVER'S LICENSE, ID CARD) FOR SIGNATURE VERIFICATION

Section 1: Information About the Data Sub	ion 1: Information About the Data Subject				
Name:			Patients	ID / Account# (N	EO Use):
Address:		City:		State:	Zip Code:
Social Security Number (optional):	Phone Number (optional):	Date	of Birth:	
	()			/	/

□ Requesting an Access report regarding my personal information, contained by NeoGenomics

 \Box Requesting a copy of my personal information, contained by NeoGenomics.

Section 2: Identity and Authority Verification
To ensure we provide access to an authorized recipient, we require you to provide us with proof of your identity
I am the data subject and have enclosed proof of my identity (see below). A COPY OF A GOVERNEMENT ISSUED IDENTIFICATION (DRIVER'S LICENSE, IDENTITY CARD) FOR <u>SIGNATURE VERIFICATION</u>
I am acting on behalf of the data subject. I have enclosed

- Evidence of entitlement (i.e. legal paperwork, power of attorney)
- *Proof of my own identity* (A COPY OF A GOVERNEMENT ISSUED IDENTIFICATION (DRIVER'S LICENSE, IDENTITY CARD) FOR <u>SIGNATURE VERIFICATION</u>

Section 3: Information About the Person Requesting this Right (on 3: Information About the Person Requesting this Right (if different from Section 1)	
Name:		
Phone Number: ()	Email address:	



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Section 4: Signatures	
Signature of Data Subject:	Date:
If a third party is requesting access on behalf of the individual, print and	i sian the name of the person requesting this information and his/her
relationship to the data subject.	
Print Name:	Relationship to Data Subject:
Signature:	Date:

FOR NEOGENOMICS ONLY:

Date Request Received:	Date Notification Was Sent To Indi	ividual Or Third Party:
Request Accepted (NeoGenomics Access Report below))	
Request Denied		
Reason for denial: NeoGenomics does not have any personal informatio Complying with request will result in disclosing inform Need evidence of third party's entitlement to request Need additional information to identify the individual 	nation about another individual t access on behalf of an individual	this request.
□ Other:		
NeoGenomics Representative's Name/Signature:		Date:



NeoGenomics Access Report

Categories Of Personal Information Concerned

Where It Was Not Obtained Directly From The Individual, Information About The Source Of The Personal Information

Purpose For Processing

The Recipients Or Categories Of Recipients To Whom The Personal Information Has Been Or Will Be Disclosed, Including Recipients In Third Party Countries Or International Organizations

Retention Period For Storing The Personal Information Or, Where This Is Not Possible, NeoGenomics' Criteria For Determining How Long It Will Store The Personal Information.

In Cases Where Processing Involves Automated Decision-Making (Including Profiling): (Leave this section blank if processing did not involve automated decision-making) Information About the Logic Involved:

The significance and anticipated consequences of processing such data for the individual:

□ Processing did not involve automated decision-making

Safeguards NeoGenomics Provides When Transferring Personal Information To A Third Country Or International Organization.



ou believe you plicable agency	r privacy rights have been violated, you may file a listed below:	a complaint	t with NeoGe	nomics Privacy Office or with the
NeoGenomics I	Privacy Office			
By Mail:	NeoGenomics Laboratories, Inc.	Ву	/ Email:	compliance@neogenomics.com
	Attn: Chief Compliance Officer			
	9490 NeoGenomics Way	Ву	Telephone:	1-239-768-0600
	Fort Myers, Florida 33912			
U.S. Based Indi	viduals			
By Mail:	Office of Civil Rights	Ву	Telephone:	1-202-619-0257
	The U.S. Department of Health and Human Service	S		or
	200 Independence Avenue, S.W.			Toll free at: 1-877-696-6775
	Washington, D.C. 20201			
	uld be done to the Data Protection Authority (DPAs) in ct information: <u>https://ec.europa.eu/justice/article-29</u>			
Swiss Based Inc	lividuals			
	uld be done to the applicable Cantonal or Municipal Da	ata Protectio	on Authority (D	PAs)
DBAs sents	et information, https://www.adach.admin.ch/adach/	on /honoo /th	o fanio/linko/d	ata protection , quitzerland html
DPAS CONta	ct information: <u>https://www.edoeb.admin.ch/edoeb/</u>	en/nome/th		
Singapore Base	d Individuals			
By Mail:	Personal Data Protection Commission	By Web:	https://www.p	odpc.gov.sg/Individuals/Complaints-and
	10 Pasir Panjang Road		Reviews/Repo	rt-a-Personal-Data-Protection-
	#03-01 Mapletree Business City		Concern/Perso	onal-Data-Protection-Complaint
	Singapore 117438			
	Attn: Officer-in-charge, Enforcement			