



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 Department, 12701 Commonwealth Dr., Suite 9, Fort Myers, FL 33913
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 Subject			
Name:		Patients ID / Account# (NEO 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
- Requesting a copy of my personal information, contained by NeoGenomics.

Section 2: Identity and Authority Verification
<p>To ensure we provide access to an authorized recipient, we require you to provide us with proof of your identity</p> <ul style="list-style-type: none"> <input type="checkbox"/> I am the data subject and have enclosed proof of my identity (see below). <u>A COPY OF A GOVERNEMENT ISSUED IDENTIFICATION (DRIVER'S LICENSE, IDENTITY CARD) FOR SIGNATURE VERIFICATION</u> <input type="checkbox"/> I am acting on behalf of the data subject. I have enclosed <ul style="list-style-type: none"> • <u>Evidence of entitlement (i.e. legal paperwork, power of attorney)</u> • <u>Proof of my own identity (A COPY OF A GOVERNEMENT ISSUED IDENTIFICATION (DRIVER'S LICENSE, IDENTITY CARD) FOR SIGNATURE VERIFICATION)</u>

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

FOR NEOGENOMICS ONLY:

Date Request Received:	Date Notification Was Sent To Individual Or Third Party:
<input type="checkbox"/> Request Accepted (NeoGenomics Access Report below)	
<input type="checkbox"/> Request Denied Reason for denial: <input type="checkbox"/> NeoGenomics does not have any personal information on the data subject referenced in this request. <input type="checkbox"/> Complying with request will result in disclosing information about another individual <input type="checkbox"/> Need evidence of third party's entitlement to request access on behalf of an individual <input type="checkbox"/> Need additional information to identify the individual. <input type="checkbox"/> Other:	
NeoGenomics Representative's Name/Signature:	Date:



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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.

Copy Of Personal Information

Attached to this report

Not requested by the individual



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If you believe your privacy rights have been violated, you may file a complaint with NeoGenomics Privacy Office or with the applicable agency listed below:

NeoGenomics Privacy Office

By Mail: NeoGenomics Laboratories, Inc.
Attn: Stephanie Bywater, Chief Compliance Officer
12701 Commonwealth Drive, Suite 5
Fort Myers, Florida 33913

By Email: compliance@neogenomics.com

By Telephone: 1-239-768-0600

U.S. Based Individuals

By Mail: Office of Civil Rights
The U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

By Telephone: 1-202-619-0257
or
Toll free at: 1-877-696-6775

E.U. Based Individuals

Report should be done to the Data Protection Authority (DPAs) in the EU Member State in which the individual resides

DPAs contact information: https://ec.europa.eu/justice/article-29/structure/data-protection-authorities/index_en.htm

Swiss Based Individuals

Report should be done to the applicable Cantonal or Municipal Data Protection Authority (DPAs)

DPAs contact information: <https://www.edoeb.admin.ch/edoeb/en/home/the-fdpic/links/data-protection---switzerland.html>

Singapore Based Individuals

By Mail: Personal Data Protection Commission
10 Pasir Panjang Road
#03-01 Mapletree Business City
Singapore 117438
Attn: Officer-in-charge, Enforcement

By Web: <https://www.pdpc.gov.sg/Individuals/Complaints-and-Reviews/Report-a-Personal-Data-Protection-Concern/Personal-Data-Protection-Complaint>