

TRANSFER OF OWNERSHIP OF BANKED DNA SAMPLE

I, _____ of (address)

Date of Birth: _____ Social Security Number: _____

wish to transfer ownership of and responsibility for the sample of banked DNA held in the DNA bank of Comprehensive Genetic Services, SC in Milwaukee, WI (or its designated responsible party) to:

Name: _____

Address: _____

Phone: _____

Signature: _____ Date: _____

Witness: _____ Date: _____