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Designation of Beneficiary

I, _____, an individual located at _____ _____("Test-Taker") hereby appoint _____, an individual located at _____ ("Beneficiary") as the sole beneficiary of my DNA sample provided to _____ ("Testing Company") on or about _____, including the test results that are or will provided by and kept with the Testing Company, and the raw data that is or will be provided by and/or kept with the Testing Company. I hereby revoke all previous designations made by me.

Upon my death or incapacitation, the Beneficiary may perform any and all lawful acts with my DNA that I did or could have performed, including performing additional testing on my DNA sample, downloading my raw data, and sharing of information about me and my ancestry.

Name (Print): _____

Signed: _____ Date: _____

Company or Third-Party Tool	Username or Email Address	Password

State of _____)
) ss
County of _____)

On this ____ day of _____ in the year _____, before me, the undersigned, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that s/he executed the same for the purposes therein contained.

_____
Notary Public