

**Associated Traditional Knowledge Transfer
ACT**

//__//_____ 20__

(place of transfer)

Under the Traditional Knowledge Associated with Genetic Resources Transfer Agreement No. _____ of //__// _____ 20__ and the Internationally Recognized Certificate of Compliance No. _____ of //__// _____ 20__, _____ (*name of the Provider*), hereinafter referred to as “the Provider”, represented by _____, acting by virtue of _____, transfers and _____ (*name of the User*), hereinafter referred to as “the User”, represented by _____, acting by virtue of _____, accepts:

Traditional knowledge associated with genetic resources (hereinafter referred to as “traditional knowledge”):

No.	Name of traditional knowledge with reference to associated genetic resources	Traditional knowledge transfer form with reference to the information holder	Comment
1.			
2.			

Associated traditional knowledge transfer date: //__//_____ 20__

Provider’s name: _____
// *signature* // // *initials, family name* //
// *stamp here* //

User’s name: _____
// *signature* // // *initials, family name* //
// *stamp here* //