

CONSUMER AFFIDAVIT TO AUTHORIZE AGENT

Instructions: The CONSUMER who is the subject of the data request must complete and submit this affidavit to verify the request.

1. I, _____ (Full Name: First, Middle Initial, Last) do hereby declare and certify that I reside at _____ (Street Address) in _____ (City/Town) in the State of California.
2. I am the registered customer for telephone number _____ and for the following email addresses: _____.
3. I authorize _____ (Representative Full Name) of _____ (Street Address) in _____ (City/Town) in the State of _____ (State) to submit this Consumer Data Request on my behalf of order to exercise access and/or deletion opt-out rights for me under the California Consumer Privacy Act, Cal Civ. Code § 1798.100 *et seq.*

I swear or affirm, under penalty of perjury, that this statement is true and correct.

(Consumer Signature)