

## Consumer's Personal Information Request Form

If you are a California consumer, you may have the right to:

- (1) Request the disclosure to you of personal information
- (2) Request the correction of inaccurate personal information
- (3) Request the deletion of personal information belonging to you that we have collected.

To exercise any of your rights, you may proceed to complete the portions of the request form below, including any applicable supplemental forms that relate to you and send them by emailing them to Cybersoft's Consumer Privacy Office at [consumerprivacy@cybersoftbpo.com](mailto:consumerprivacy@cybersoftbpo.com). You may also complete the Consumer's Personal Information Request Form online at <http://www.cybersoftbpo.com/consumer-personal-information>.

You are entitled to only two (2) requests within a twelve (12) month period.

For more information about our privacy practices, you may review the Privacy Policy of Cybersoft, Inc. at <http://www.cybersoftbpo.com/privacy-policy-2023>.

**Right to Disclosure to You:** You have the right to request the disclosure to you of the categories of personal information, the categories of the sources of personal information, the specific pieces of personal information, the categories of third persons to whom personal information has been disclosed and the business purpose for collecting personal information belonging to you that we have collected and that is subject to CCPA.

**Right to Correction:** You have the right to request the correction of inaccurate personal information belonging to you that we have collected and that is the subject to CCPA.

**Right to Deletion:** You have the right to request the deletion of personal information belonging to you that we have collected and that is subject to CCPA. We will delete information unless an exception under §1798.105(d) of the CCPA applies.

**Step 1: Please verify if you are a California consumer.**

Are you a California Resident?

YES

NO

Are you a natural person?

YES

NO

Are you a corporation, a partnership, an LLC or other legal entity?

YES

NO

If you answered "YES," you are not a California consumer, and therefore, do not possess the above-described rights under CCPA. Do not proceed with this form.

Step 2: Please specify what type of request this is.

Request for Disclosure to You of Personal Information Belonging to You that We Have Collected

Request for Correction of Inaccurate Personal Information Belonging to You that We Have Collected

Request for Deletion of Personal Information Belonging to You that We Have Collected

Step 3: Please identify who is making the request.

Myself as Consumer

Complete Step 4. Skip Step 5. Then proceed to Steps 6, 7, 10 and 11

Authorized Agent on behalf of a Consumer

Complete Steps 4, 5, 6, 7, 8, 9, 10 and 11

Step 4: Fill in Consumer's Information below.

Consumer's Information:

\*First Name \_\_\_\_\_

\*Last Name \_\_\_\_\_

\*Date of Birth (MM/DD/YYYY) \_\_\_\_\_

\*Email Address \_\_\_\_\_

\*Primary Telephone Number (Include area code) \_\_\_\_\_

Other Telephone Number (Include area code) \_\_\_\_\_

\*Address Line 1 (Street address) \_\_\_\_\_

Address Line 2 \_\_\_\_\_

Apartment, suite, floor, etc. \_\_\_\_\_

\*City \_\_\_\_\_

\*State \_\_\_\_\_

\*Zip Code \_\_\_\_\_

**\*Required Fields**

NOTE: Proper authentication is critical to protect consumer privacy and maintain data security so verification of consumer identity shall be conducted. To verify a consumer's identity, the identifying information provided above will be matched with the personal information we may have collected.

Step 5: Fill in Authorized Agent's Information below.

Authorized Agent's Information:

\*First Name \_\_\_\_\_  
\*Last Name \_\_\_\_\_  
\*Date of Birth (MM/DD/YYYY) \_\_\_\_\_  
\*Email Address \_\_\_\_\_  
\*Primary Telephone Number (Include area code) \_\_\_\_\_  
Other Telephone Number (Include area code) \_\_\_\_\_  
\*Address Line 1 (Street address) \_\_\_\_\_  
Address Line 2 \_\_\_\_\_  
Apartment, suite, floor, etc. \_\_\_\_\_  
\*City \_\_\_\_\_  
\*State \_\_\_\_\_  
\*Zip Code \_\_\_\_\_

**\*Required Fields**

If Authorized Agent is or represents a legal entity, fill in legal entity's information below. If Authorized Agent is not or does not represent a legal entity, fill in "Not Applicable" or "N/A."

Legal Entity's Information:

\*Legal Name \_\_\_\_\_  
\*DBA Name \_\_\_\_\_  
\*California Registration No. \_\_\_\_\_  
\*Email Address \_\_\_\_\_  
\*Primary Telephone Number (Include area code) \_\_\_\_\_  
Other Telephone Number (Include area code) \_\_\_\_\_  
\*Address Line 1 (Street address) \_\_\_\_\_  
Address Line 2 \_\_\_\_\_  
Apartment, suite, floor, etc. \_\_\_\_\_  
\*City \_\_\_\_\_  
\*State \_\_\_\_\_  
\*Zip Code \_\_\_\_\_

**\*Required Fields**

Step 6. Select how you would like to receive our response

By email to the email address provided above

By mail to the address provided above

NOTE: If you are a Consumer submitting this request, we will email or mail the information provided in the Consumer Information section above.

If you are an Authorized Agent submitting this request, we will email or mail the information provided in the Authorized Agent Information section above.

Step 7: Download and complete Declaration of Consumer's Identity Form available at <http://www.cybersoftbpo.com/privacy-policy-2023/#forms>

Step 8: Download and complete Declaration of Authorized Agent Form available at <http://www.cybersoftbpo.com/privacy-policy-2023/#forms>

Step 9: Download and complete Declaration of Authorized Agent's Identity Form available at <http://www.cybersoftbpo.com/privacy-policy-2023/#forms>

Step 10: Send completed CCPA Consumer Personal Information Request Form along with completed Declaration of Consumer's Identity, and if consumer uses an authorized agent, also send completed Declaration of Authorized Agent along with completed Declaration of Authorized Agent's Identity to Cybersoft's Consumer Privacy Office at [consumerprivacy@cybersoftbpo.com](mailto:consumerprivacy@cybersoftbpo.com)

Step 11: Sign and date Consumer's Personal Information Request Form

\*Consumer Name: \_\_\_\_\_

\*Signature: \_\_\_\_\_

\*Date: \_\_\_\_\_

**\*Required Fields**