

FOR CALIFORNIA RESIDENTS

Our privacy policy provides that you may, in certain circumstances, request access to, disclosure of or deletion of your personal information. Please use this form to submit a request regarding your personal information. Note that this process may be used only by residents of California.

California law requires that we confirm that you are the person identified in this form before we provide any information to you, and we also must confirm that you are a resident of California.

Please print and fully fill out this form and submit to us via email at legislation@whoscalling.com. Once we receive your request, we will contact you to confirm your identity and your California residency. If we are able to confirm these matters, we will then evaluate your request and provide a response within forty-five days after we receive your completed form. If we are unable to fully respond to your request within that time, we will contact you and let you know when and how we will be able to fully respond.

Please fully fill out the form below:

Name: _____

Address: _____

Nature of your business with us:

Choose one or more of the following requests:

- Provide a description of the types of information that have been gathered about me and how the information was gathered.
- Provide me access to the information that has been gathered about me, specifically:
_____.
- Describe how my personal information has been used.
- Describe the types of third parties with which my information was shared.
- Delete my personal information.

Date: _____