

**California Resident Privacy Rights
Request Form**

The California Consumer Privacy Act (CCPA) provides you, as a resident of the State of California, the right to request to know and/or delete your personal information collected by Naturally Slim.

Naturally Slim takes our obligation to protect your data seriously. In order to process your data request, we need some basic information from you. The information requested in this form is essential to Naturally Slim’s efforts to verify you are who you claim to be, to locate your data within our systems and to confirm your rights with respect to the request(s) made by you. If we determine that a basis exists to deny your request, we will provide you with an explanation for that determination.

Please note: If you choose not to provide the information requested in this form, Naturally Slim may be unable to process your request and will respond to you with an explanation for the denial.

Consumer Name:	
Email:	
Phone:	
Address:	
Employer (if applicable):	
Insurance Carrier (if applicable):	

The Right to Know and Access

- I would like to get a report of the personal information Naturally Slim has about me.

- I would like to get a report listing the categories of personal information Naturally Slim has about me.

The Right to Delete

- I would like Naturally Slim to delete the personal information it has on me.

In order to fulfill this request, Naturally Slim will need to reasonably verify your information matches the information in Naturally Slim’s records. This may require additional follow-up to ensure confidence that this request can be fulfilled. We will work to fulfill this request in a timely manner that complies with the legal requirements under the CCPA.

If this request is being submitted as an Authorized Agent of someone else, please state your name and relationship to the person about whom this request relates. Naturally Slim requires proof you are legally permitted to act on that person’s behalf (e.g. power of attorney, proof of guardianship). Please email such proof to privacy@naturallyslim.com.

Authorized Agent Name:	
Relationship to Consumer:	

Please read and select the applicable option below:

- I declare under penalty of perjury that I am the individual consumer whose personal information is the subject of the request.

- I declare under penalty of perjury that I am the Authorized Agent of the individual whose personal information is the subject of the request. I understand I will be required to provide proof in writing of my status as the individuals Authorized Agent and additional information to confirm my identity.

To help us process your request, please let us know how Naturally Slim may have obtained your information. For example, *“I am a user of the Naturally Slim program”* or *“I have previously inquired about Naturally Slim’s products.”*

I acknowledge that transmitting personal information over the internet or via mail comes with inherent risks including the risk that the information will be exposed to unauthorized individuals. I understand the risks associated with my chosen method for receiving information pertaining to my request and accept responsibility for any unauthorized access occurring after Naturally Slim sends my information in the chosen method. I acknowledge and agree that a member of Naturally Slim’s team may contact me via email, phone or mail to process and/or complete my request.