

ATTESTATION FOR AUTHORIZED AGENT CALIFORNIA CONSUMER PRIVACY ACT REQUESTS
(IF THE AUTHORIZED AGENT IS A BUSINESS)

Business entities must be registered with the California Secretary of State to submit requests on behalf of a California resident pursuant to the California Consumer Privacy Act.

Authorized Agent Attestation

Please provide the following information about the California registered business entity acting on behalf of the California resident:

Entity Type (check one): Corporation LLC/LP

Full Legal Entity Name: _____

Entity Number: _____

Entity Representative Attestation:

1. I _____ [Name], _____ [Title] affirm that I am an authorized representative of the above-named entity with the authority to submit this access or deletion request on behalf of the California resident named below.

2. I hereby verify that the enclosed authorization document is a true and correct copy.
Authorization Document Type: Power of Attorney Other

3. If I checked the "Other" box above, I also have enclosed a true and accurate copy of the valid government-issued photo identification of the California resident.

4. The enclosed authorization document is still in full force and effect.

Consumer Information

Please provide the following information about the California resident on whose behalf you are submitting this request (all starred fields are mandatory):

*Name: _____

*Street Address: _____ *State: _____ *Zip Code: _____

Email: _____ Phone Number: _____

Disclaimer: Sinomax USA, Inc. or its affiliate, as applicable (the "Company") reserves the right to have the California resident confirm their identity directly with the Company for verification purposes.

I UNDERSTAND THAT THE INFORMATION PROVIDED HEREIN IS TO BE RELIED UPON BY THE COMPANY TO RESPOND TO A CALIFORNIA CONSUMER PRIVACY ACT REQUEST IN ACCORDANCE WITH SUCH LAW.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature: _____

Print Name: _____

Date: _____