

California Consumer Privacy Act -Webform

First Name:	Last Name:	Middle Initial:
Email:		
Phone Number:		
Comments:		
Under applicable laws you can ask us for the following information:		
Please select the type of information you are requesting.		
Right to know about personal informat	ion that we collected, disclosed or sold	
Right to request deletion of personal information		
Right to op-out of the sale of personal i	nformation	
Right to non-discrimination for the exe	rcise of a consumer's privacy rights	

You can also ask another person to invoke these rights on your behalf as your authorized agent. Please email the power of attorney authorizing your agent, along with this form to privacyoffice@te.com