

*Instructions:* Virginia residents have the right to designate an authorized person or corporate entity to exercise rights granted to them. To make this designation, residents may complete and submit this form.

If Mission Lane is unable to verify the identity of the person submitting this form, we may request additional information from the person making the submission. Authorized agents that have been provided a power of attorney from an individual may submit requests directly on behalf of that individual.

Please submit this form to Mission Lane via email at [stateprivacy@missionlane.com](mailto:stateprivacy@missionlane.com).

**Full Name:** \_\_\_\_\_

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

**Mailing Address:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Name of Authorized Agent:** \_\_\_\_\_

**Email Address for Authorized Agent:** \_\_\_\_\_

**How Should Responses Be Provided?**  To my authorized agent

To me

**By signing below, I authorize the agent identified above to make the following types of request on my behalf:**

- Request to **access, delete, and correct** certain personal information we collect
- Request to **restrict the use of your personal information for targeted advertising**
- Request to **control our use of sensitive personal information**
- Request **to appeal** a denial of a consumer rights' request

**SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_

**PRINT NAME** \_\_\_\_\_