Adjusters International

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Instructions: Complete this affidavit before a notary public and submit it to verify your request. Please note, we cannot accept the affidavit without the signature and seal of a licensed notary public

Consumer Affidavit to Authorize Agent

1.	I,(Full Name: First, Middle Initial, Last) do hereby declare and certify that I reside at	
		(Street Address) in
		(City/Town) in the State of California
	r the following email addresses:	one number and
3.	I authorize	(Representative Full Name) of
	(Street Address) in	
		(City/Town) in the State of
	(State) to submit Consumer Privacy Request	
	# on my beha request deletion or opt-out rights for n	alf of order to obtain information and/or to ne under the California Consumer Privacy Act.
I s	wear or affirm, under penalty of perjury	y, that this statement is true and correct.
		(Consumer Signature)
cribe	d and Sworn before me this day:	(notary public)

