

Green Card Lottery Experts 366 Amsterdam Avenue #163 New York, NY 10024 United States Tel. (USA): +1-917-444-9402

Alt. Tel. (UK): +44-20-3318-1050

## DATA SUBJECT REQUEST FORM

**Post Haste S.L.** ("Company") values the privacy rights of its users, customers, partners, suppliers, vendors and others. As required by the EU General Data Protection Regulation ("GDPR") and by the California Consumer Privacy Act of 2018 ("CCPA") (collectively, "Data Protection Laws"), European Union residents and California residents are permitted to make certain requests regarding our processing of personal data ("a data subject request").

In order to submit a data subject request under the Data Protection Laws, please complete this form and send it to our data protection officer at: <a href="mailto:Privacy@GCLexperts.com">Privacy@GCLexperts.com</a>

Upon receipt of your completed request, we will process it and respond within the timelines required under applicable Data Protection Laws.

If we require additional information from you, we will contact you through the contact information you provided in this form. Information provided in connection with this request will be processed only for the purpose of processing and responding to your request and will be deleted immediately thereafter.

For more information, please review our **Privacy Policy**.

The processing of the request is free of charge; however, we may want to reserve the right to charge a reasonable fee to cover certain administrative costs (such as providing additional copies of the data) or for handling manifestly unfounded or excessive requests.

Full Name:			
Address (including ZIP Code):			
Email Address:			
Phone Number:			
Please check the applicable box:			
	I would like to receive information regarding why and how you are processing my information.		
	I would like to receive a copy of the personal data you process on me.*		
	I would like you to delete the personal data you retain with respect to me.		
	I would like you to stop processing my personal data.		
	I would like to receive a copy of my data and transfer it to a third party.*		
	I would like you to stop sending me direct marketing.		
	I want to withdraw my consent for the processing of my personal data (applicable under the GDPR).		
	I would like to object to the processing of my personal data (applicable under the GDPR).		



Attached as Exhibit A is my: \_\_\_\_\_

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	☐ I believe the personal data that you retain with respect to me is incorrect and I would like to correct it (applicable under the GDPR).			
	☐ I would like you to erase my recorded phone call.			
	Other			
policy	use note that under the CCPA your rights only apply to collected 12 months prior to the request and you can a 12 month period.			
Subst	tantiate the request - please provide additional	information about your request:		
What	t is your relationship with us (consumer, user, o	customer, employee, partner, etc.)?		
Verif	ication of Identity			
In ord	der to keep the privacy of individuals safe, we			
need t	to make sure you are indeed who you say you			
are ar	nd for this reason we need to verify your identity.			
Pleas	se provide us with a photo ID document			
(i.e., o	driver license, passport):			
	e provide proof of address so we can confirm you a cable (upload one of the following: utility bill, bank			