CCPA Request Form

Please complete the following information and tick “X” where necessary. Fields marked with “*” are required for the request to be processed.

We recommend that you review our Privacy Policy https://www.gambinoslot.com/privacy-policy/ before completing and submitting this form.

1. This request is submitted*:
   - [ ] By the consumer himself or herself
   - [ ] By an authorized agent of the consumer (a copy of the power of attorney or other written permission authorizing the agent to submit the request on behalf of the consumer must be provided)

2. Contact details of the consumer:
   
   Full Name*: ________________________________
   
   Address for correspondence (optional):
   __________________________________________

   Telephone (optional): ______________________
   Email*: __________________________

   Your authorized agent’s contact details (if applicable):
   
   Full Name*: ________________________________

   Telephone (optional): ______________________
   Email*: __________________________

   [Upload Attachment: A copy of the power of attorney or other written permission authorizing the agent to submit the request on behalf of the consumer]

3. My request is for * (you may select more than one):
   - [ ] Right to access
   - [ ] Right to deletion
   - [ ] Right to disclosure of information collected or sold about you
   - [ ] Right to opt-out of the sale of your information

   (further details on each right can be found in our privacy policy https://www.gambinoslot.com/privacy-policy/)

4. Additional comments relating to this request (optional)
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
Please note:

We may ask you for additional information to confirm your identity and for security purposes, before disclosing the personal data requested to you, by using a two or three points of data verification process, depending on the type of information you require. If you have a password protected account with us, we may ask to verify your request through the account’s existing authentication methods. If you request that we disclose or delete your information, we will require you to re-authenticate with your account.

We reserve the right to charge a fee where permitted by law, for instance if your request is manifestly unfounded or excessive.

Date: ____________                     signature: _____________________