

DATA SUBJECT ACCESS REQUEST FORM

For Customers and Fans of Taylor Guitars

Please complete using capital letters only. Complete as much of the requested information as possible, providing as much detail as you are able. The more detail you're able to provide concerning your request, the more likely Taylor Guitars will be to find the information that you seek. The information provided herein will only be used in order to process your request, and will not be kept any longer than is necessary to do so.

1. Details of the Individual Requesting Information

Full Name:	Fax Number:
Postal Address:	Physical Address:
Primary Telephone Number:	Alternate Telephone Number:
Primary Email:	Alternate Email:

2. Are You the Data Subject? Is the Information About You?

- <u>YES:</u> If the requested information is about you, please include the following with this completed form, making sure that each page of submitted documentation has been notarized:
 - Multiple forms of current identification, each bearing your photograph and your signature, that will allow us to verify your identity and match that identity with our data records, such as a copy of your passport, driver's license, and other supporting documentation
 - · A recent bill from a utility, rental agency, or mortgage company as proof of address

Then, please continue on to Question #5.

- NO: If you are acting on behalf of the data subject with their legal written authority, please include the following with this completed form, making sure that each page of submitted documentation has been notarized:
 - Multiple forms of current identification for both you and the data subject, each bearing a photograph and a signature, that will allow us to verify each of your identities and to match the data subject's identity with our data records, such as a copy of a passport, a driver's license, and other supporting documentation
 - A recent bill from a utility, rental agency, or mortgage company as proof of address for the data subject
 - A signed copy of the legal written authority that allows you to act on behalf of the data subject

Then, please complete Questions #3 and #4.

3. Details of the Data Subject Full Name: Fax Number: Postal Address: Physical Address: Primary Telephone Number: Alternate Telephone Number: Primary Email: Alternate Email: 4. Please Describe Your Relationship with the Data Subject that Leads You to Make this Request for Information on Their Behalf Description: 5. Please Describe the Personal Data and Information You Seek in as Much Detail as Possible Specific Data 1: Description: Specific Data 2: Description:

Specific Data 3:
Description:
Specific Data 4:
Description:
Specific Data 5:
Description:
6. Please Enclose any Additional Information that May Assist Taylor Guitars in Process Your Request as Accurately and Quickly as Possible

DECLARATION

To be completed by all requestors. Please note that any attempt to mislead may result in prosecution.	
Taylor Guitars is true. I understand that it is necessary identity, and that it may be necessary for Taylor Guitar	rs to obtain more detailed information in order to locate itars will respond to this request without undue delay as
Print Name:	Date:
Signature:	
RIGHT TO BE FORGOTTEN - OPTIONAL	
This section is optional. Please only complete this sec and prefer that Taylor Guitars delete all of your perso	tion if you wish to exercise your "right to be forgotten" nal data on record.
PLEASE BE AWARE THAT SUCH DELETION WILL INVIRREVERSIBLE, AND UNRECOVERABLE.	OLVE ALL OF YOUR DATA, AND WILL BE PERMANENT,
that Taylor Guitars delete all of my data on record. I ur irreversible, and unrecoverable. I also understand that subject's identity, and that it may be necessary for Tay	ish to exercise my "right to be forgotten" and request inderstand that this deletion of my data will be permanent, it is necessary for Taylor Guitars to confirm my / the data volor Guitars to obtain more detailed information in order Taylor Guitars will respond to this request without undue necessary, relevant details have been received.
Print Name:	Date:
Signature:	
INSTRUCTION	
Please fax this completed, notarized form with all requ	lested detail and notarized documentation to:
Taylor Guitars Customer Service Attn: DSAR Processing Agent Fax Number: 619-596-3959	
Please provide your Notary's name, phone number and	d address below:
Notary Name:	Notary Phone Number:
Notary Address:	