**Unico American Corporation**

**California Consumer Privacy Act**

**Authorized Agent Form**

*This authorized agent form may be used to designate a natural person or business entity registered with the California Secretary of State to act on the undersigned California resident’s behalf subject to the requirements of the California Consumer Privacy Act (“CCPA”) and its implementing regulations.*

**\*\*\*\*\*\*\*\*\*\*\***

**Authorized Agent: \_\_\_\_\_ Individual \_\_\_\_\_\_ Registered Entity**

**Consumer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Agent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I, [ ], the undersigned, do hereby authorize [ ] of [ ] to act on my behalf and take all actions necessary relating to my rights under the CCPA, including submitting verifiable requests to, and communicating with Unico American Corporation.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Requestor Name Requestor Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agent Name Agent Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: