Walmart, Inc. (hereinafter “Company”)

Name of Consumer:

**AUTHORIZED AGENT-BUSINESS ENTITY**

**CALIFORNIA CONSUMER PRIVACY ACT**

STATE OF __________________________  )
                                             ) SS.
COUNTY OF __________________________  )

Business entities must be registered with the California Secretary of State to submit requests on behalf of a consumer pursuant to the California Consumer Privacy Act.

**Authorized Agent Attestation**

Please provide the following information about the California registered business entity acting on behalf of the California Consumer:

- Entity Type (check one):  □ Corporation  □ LLC/LP
- Full Legal Entity Name: ______________________________________________________
- Entity Number: _______________________

Entity Representative Attestation:

1. I _________________ [Name], _________________[Title] affirm that I am an authorized representative of the above-named entity with the authority to submit this access or deletion request on behalf of the California resident named below.

2. I hereby verify that the enclosed authorization document is a true and correct copy.

   Authorization Document Type:  □ Power of Attorney  □ Other

   If I checked the “Other” box above, I also have enclosed a true and accurate copy of the valid government-issued photo identification of the consumer.

3. The enclosed authorization document is still in full force and effect.
Consumer Information

Please provide the following information about the California consumer on whose behalf you are submitting this request:

*all starred fields are mandatory

*Name: _______________________________________________

*Street Address: ______________________________________

_________________________________  *State: ______  *Zip Code: ______________

Email: _____________________________________________

_________________________________________  Phone Number: __________________________

Disclaimer:
Walmart Inc. or its affiliate, as applicable (the “Company”) reserves the right to have the consumer confirm their identity directly with the Company for verification purposes.

I UNDERSTAND THAT THE INFORMATION PROVIDED HEREIN IS TO BE RELIED UPON BY THE COMPANY TO RESPOND TO A CALIFORNIA CONSUMER PRIVACY ACT REQUEST IN ACCORDANCE WITH THE LAW.

Date: __________________________  __________________________

Signature

______________________________

Print Name

SUBSCRIBED AND SWORN to before me this _________ day of

___________________________, 20___.

______________________________

Notary Public

My Commission Expires:

___________________________