



REQUEST TO DELETE

Your Name _____

Your Mailing Address _____

Daytime phone number _____

Today's Date _____

Information you are requesting to have deleted:

All information

Only the following:

We will respond regarding information we have collected in the preceding 12 months. We will acknowledge your request within 10 days, and delete the information within 45 days. If we are not able to complete your request within 45 days, we will notify you of such, and complete your request within 90 days of receipt of the original request.

We will maintain a record of this request, as described in the law.

If we are unable to comply with your request, we will inform you of the reason.

For requests submitted through our website, please complete and click here.

You may also submit this form in person at any of our branches, or call us at (888) 831-5295