

**California Consumer Privacy Act (“CCPA”) Authorized Agent Declaration of Identity Form**

**Return To:** Quick Bridge Funding, LLC by emailing [Privacy@quickbridge.com](mailto:Privacy@quickbridge.com)

To: Quick Bridge Funding (“Quick Bridge”)

From: \_\_\_\_\_ (“Authorized Agent”)

In connection with the CCPA Personal Information Request Form and/or CCPA Right to Opt-Out of Sale of Personal Information Request Form (the “Request”) delivered to Quick Bridge pursuant to the CCPA, Authorized Agent hereby swears and certifies to Quick Bridge that:

1. Authorized Agent’s full legal name (first, middle, last) is:

\_\_\_\_\_

2. Authorized Agent resides at (street address):

\_\_\_\_\_

at \_\_\_\_\_ (town/city)

in the State \_\_\_\_\_

3. Consumer has authorized Authorized Agent to submit the Request on the Consumer’s behalf.

4. Authorized Agent’s relationship to Consumer is \_\_\_\_\_

5. All information Authorized Agent submits to Quick Bridge in the Request shall be true and correct in all respects.

Authorized Agent recognizes any false statement or other misrepresentation made in this Declaration of Identity may subject them to civil and criminal penalties. Authorized Agent shall indemnify and hold harmless Quick Bridge, its affiliates, and subsidiaries and each of their respective officers, directors, managers, members, employees, and agents from any and all liability arising out of any fraudulent statements by Authorized Agent contained in this Declaration of Identity.

Authorized Agent hereby swears under the penalty of perjury that the facts referred to in this declaration are true, complete, and correct:

Authorized Agent Printed Name: \_\_\_\_\_

Authorized Agent Signature: \_\_\_\_\_

Date: \_\_\_\_\_