

CUSTOMER DATA REQUEST – PAPER FORM:

In order for Intermex to accept your request, certain information is necessary to validate your identity. The verification process helps ensure that Intermex is honoring your requests for information about you, and not about someone else.

Intermex will review the personal information collected in the past 12 months from the date of this customer’s request, will confirm receipt of the request within 10 days. Intermex will respond to this request within 45 days, but if we require more time (up to an additional forty-five days) we will notify you of our need for additional time. Intermex cannot respond to your request or provide you with personal information if we cannot verify your identity and confirm that the personal information relates to you. Please print, sign and submit along with a copy of a current and valid California picture identification to fax 1-800-828-2900 or email regulatory@intermexusa.com.

CUSTOMER INFORMATION

1. If a Customer (Parent or Legal Guardian), an Employee (Former or Current), or an Authorized Agent;	<input type="checkbox"/> Customer <input type="checkbox"/> Employee <input type="checkbox"/> Authorized Agent
2. First, Middle, and Last name;	
3. Date of Birth (mm/dd/yyyy);	___ / ___ / _____
4. Current street address (or previous street address);	
5. Form of current picture identification accepted by Intermex;	<input type="checkbox"/> California DL or ID <input type="checkbox"/> US Passport No.: _____
6. Primary Phone Number;	(____) _____ - _____
7. Alternate Phone Number;	(____) _____ - _____
8. Primary Email address;	
9. Intermex Loyalty Program number/identification;	
10. Intermex Employee (current or former) please provide your Employee ID #;	
11. If an Intermex Authorized Agent (current or former) please provide your Agent ID #;	
12. Have you ever transacted with Intermex before?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
13. Control Number or PIN associated with the transaction(s);	
14. If an Online account exists, provide user information;	
15. Request type (Required):	<input type="checkbox"/> Information collected in the last 12 months <input type="checkbox"/> Information/Data deletion
16. Description: <i>Any additional information that will help process the request (e.g. other addresses or email addresses associated to your account or service, description of your general inquiry, Intermex agent location where service was conducted, etc.)</i>	

Identity Verification Declaration

I, _____, declare under penalty of perjury that:

I submitted requests for disclosure or deletion of information to Intermex Wire Transfer, LLC., Intermex Wire Transfer, Corp., and Intermex Wire Transfer II, LLC, jointly known as "Intermex" as permitted by the CCPA; and the information I submitted in this form is about myself and is true, current and correct and that this was signed at _____, California.

Date

Signature