



# Williston Financial Group California Consumer Privacy Act Authorized Agent Form

This authorization 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.

<b>Authorized Agent</b>	Individual
	Registered Entity
<b>Consumer Name</b>	
<b>Agent Name</b>	

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 Williston Financial Group or one of its subsidiaries and/or affiliates.

<b>Consumer Signature</b>	
<b>Consumer Address</b>	Street
	City, State
<b>WFG File #</b>	
<b>Date</b>	
<b>Authorized Agent Signature</b>	
<b>Date</b>	