

Privacy Rights Request Form

The SmAll Market Privacy Rights Request

TSM respects your privacy and is committed to complying with all applicable privacy laws. If you are a resident of a U.S. state that grants specific privacy rights (such as California, Virginia, Colorado, Connecticut, or Utah), you may use this form to submit a request regarding your personal information.

Please complete the following fields so we can process your request:

1. Contact Information

- Full Name: _____
- Email Address: _____
- Phone Number (optional): _____
- State of Residence: _____

2. Request Type

(Please check all that apply)

- ☐ Request to Know – I want to know what personal information TSM collects, uses, shares, or sells about me.
- ☐ Request to Access – I want a copy of my personal information held by TSM.
- ☐ Request to Delete – I want TSM to delete my personal information, subject to legal exceptions.
- ☐ Request to Correct – I want TSM to correct inaccurate personal information about me.
- ☐ Request to Opt Out – I want to opt out of the sale or sharing of my personal information for targeted advertising.
- ☐ Request to Limit – I want to limit the use of my sensitive personal information (where applicable).

3. Identity Verification

To protect your privacy, we may need to verify your identity. Please provide:

- The email address or phone number used with TSM services.
- Any recent transaction or communication reference (if applicable):

We may contact you to request additional information necessary to verify your identity or authority to make this request.

4. Authorized Agent (if applicable)

If you are submitting this request on behalf of someone else, please provide your:

- Name: _____
- Relationship to the consumer: _____
- Authorization documentation: (attach signed permission or power of attorney)

5. Declaration

By submitting this request, I declare under penalty of perjury that the information provided is true and that I am the individual whose personal information is the subject of this request, or I am legally authorized to submit this request on their behalf.

Signature: _____

Date: _____

Submit this form to:

privacy@thesmallmarket.com

or by mail to:

TSM address – 333 SE 2ND AVE. SUITE 2000 MIAMI FL 33131

We will respond to your request within the timeframe required by applicable law. If we need more time or information, we will let you know.