



Personal Information Review and Removal Request Form

For privacy reasons, you may have the right to ask for certain personal information relating to you to be reviewed and/or removed as part of data protection laws in certain jurisdictions.

This form is for requesting the review and/or removal of personal information that Farmer Bros. Co. may have collected, processed or stored as part of an employment or transaction between you and Farmer Bros. Co. ("FBC"). If you can provide sufficient information, FBC should be able to process your request quickly.

FBC will endeavor to respond within forty-five (45) days after the latter of the following:

- Our receipt of your written request; or
- Our receipt of any further information FBC may ask you to provide to enable us to comply with your request.

You will need a digital copy of an identification document to complete this form. If you are submitting this request on behalf of someone else, you will need to supply identification documentation for them and notarized proof of their consent for you to submit this form.

Once completed, please email completed form to privacy@farmerbros.com.

A. Personal Information Requested

First name: _____ Last name: _____

Residence Address: _____ Email Address: _____

Primary Phone: _____ Secondary Phone: _____

B. Are you the Data Subject?

- Yes: I am the Data Subject. I enclose proof of my identity (Skip Section C and proceed to D).
- No: I am acting on behalf of the Data Subject. I have enclosed a notarized copy of Data Subject's written authority, proof of the Data Subject's identity, and my own identity (See Section C).

NOTE: Attach a legible copy of a document that verifies the identity of the person on whose behalf the request is made.

To prevent fraudulent removal requests from people impersonating others, trying to harm competitors, or improperly seeking to suppress legal information, FBC needs to verify the identity of the person on whose behalf the request is made (the relevant individual). A passport or other government-issued ID is not required. You may obscure parts of the document (e.g. ID number) as long as the remaining information identifies the relevant individual. You may also obscure any photograph in the identification document, unless you are asking for removal of pages that include photographs of the relevant individual. FBC will use this information solely to help us assess and document the authenticity of your request and will delete the copy within a month of closing your removal request except as otherwise required by law.

C. Details of the Person (If you are representing the Data Subject)

If you are making the request on behalf of someone else who you are authorized to represent, please fill this section. If you are representing someone else, you must have the legal authority to act on their behalf.



First name: _____ Last name: _____

Postal Address: _____ Email Address: _____

Primary Phone: _____ Secondary Phone: _____

D. Information Request and/or Erasure

- Request for Personal Information Review
- Request for Personal Information Erasure

Please provide the personal information you request to be erased:

Please note that in certain circumstances, where erasure would adversely affect legal and contractual obligations, FBC may not be able to process your request(s). In such cases, FBC will provide you the reasons for that decision.

E. Reasons for Request(s)

Please provide the reason(s) for this request(s):

- Personal information is no longer necessary
- You no longer consent to the processing of your personal information
- You object to the processing of your personal information
- You feel your personal information has been unlawfully processed
- Other reasons: _____

F. Have you filed a previous request?

If you (or the relevant individual) have submitted previous requests asking FBC to remove similar content, please include a copy of the response email FBC sent you (or the relevant individual) with the new notice.

G. SWORN STATEMENTS

Please read the following statements and confirm that you agree.

I consent to the processing of the personal information that I am submitting, as outlined below.

I represent that the information in this request is accurate and that I am authorized to submit this request. I understand that FBC will not be able to process my request if the form is not properly filled out or if the request is incomplete.



H. SIGNATURE

Signed on this date of: _____

Name: _____ Signature: _____

I. Documents which must be attached to this request:

- Evidence of your Identity
- If Data Subject is being represented:
 - Evidence of the Data Subject's Identity
 - Notarized Authorization from the Data Subject
- Other supporting documentation