C-2 Model Form for Initial Opt-out Notice (Joint Notice)

(II) [Include, if applicable, in a subsequent notice the following information, including an annual notice, for consumers who may have previously opted out:] If you have already made a choice to limit marketing offers from our affiliates, you do not need to act again until you receive the renewal notice.

To limit marketing offers, contact us [include all that apply]:
— By telephone: 1-877-###–####
— On the Web: www.—.com
— By mail: check the box and complete the form below, and send the form to:

[Company name]
[Company address]

Do not allow your affiliates to use my personal information to market to me.

C-3 Model Form for Renewal Notice (Single-Affiliate Notice)

(III) [Include, if applicable, in a subsequent notice the following information, including an annual notice, for consumers who may have previously opted out:] If you have already made a choice to limit marketing offers from our affiliates, you do not need to act again until you receive the renewal notice.

To limit marketing offers, contact us [include all that apply]:
— By telephone: 1-877-###–####
— On the Web: www.—.com
— By mail: check the box and complete the form below, and send the form to:

[Company name]
[Company address]

Do not allow your affiliates to use my personal information to market to me.

C-4 Model Form for Renewal Notice (Joint Notice)

(III) [Include, if applicable, in a subsequent notice the following information, including an annual notice, for consumers who may have previously opted out:] If you have already made a choice to limit marketing offers from our affiliates, you do not need to act again until you receive the renewal notice.

To limit marketing offers, contact us [include all that apply]:
— By telephone: 1-877-###–####
— On the Web: www.—.com
— By mail: check the box and complete the form below, and send the form to:

[Company name]
[Company address]

Do not allow your affiliates to use my personal information to market to me.
Federal Trade Commission

— (Optional: Federal law gives you the right to limit some but not all marketing from the [ABC] companies. Federal law also requires us to give you this notice to tell you about your choice to limit marketing from the [ABC] companies.)
— You may limit the [ABC companies], such as the [ABC credit card, insurance, and securities] affiliates, from marketing their products or services to you based on your personal information that they receive from other [ABC] companies. This information includes your [income], your [account history], and your [credit score].
— Your choice to limit marketing offers from the [ABC] companies will apply until you tell us to change your choice/[for x years from when you tell us your choice]/[for at least 5 years from when you tell us your choice]. (Include if the opt-out period expires.) Once that period expires, you will receive a renewal notice that will allow you to continue to limit marketing offers from the [ABC] companies for [another x years]/[at least another 5 years].
— [Include, if applicable, in a subsequent notice, including an annual notice, for consumers who may have previously opted out.] If you have already made a choice to limit marketing offers from the [ABC] companies, you do not need to act again until you receive the renewal notice.

To LIMIT MARKETING OFFERS, CONTACT US [include all that apply]:
— BY TELEPHONE: 1-877-###–####
— ON THE WEB: www.—.com
— BY MAIL: check the box and complete the form below, and send the form to:
[Company name]
[Company address]

Do not allow any company [in the ABC group of companies] to use my personal information to market to me.

C–3 MODEL FORM FOR RENEWAL NOTICE (SINGLE-AFFILIATE NOTICE)

[RENEWING YOUR CHOICE TO LIMIT MARKETING]/[RENEWING YOUR MARKETING OPT-OUT]

— (Name of Affiliate) is providing this notice.
— (Optional: Federal law gives you the right to limit some but not all marketing from our affiliates. Federal law also requires us to give you this notice to tell you about your choice to limit marketing from our affiliates.)
— You previously chose to limit our affiliates in the [ABC] group of companies, such as our [credit card, insurance, and securities] affiliates, from marketing their products or services to you based on your personal information that we share with them. This information includes your [income], your [account history with us], and your [credit score].
— Your choice has expired or is about to expire.

To RENEW YOUR CHOICE TO LIMIT MARKETING FOR [X] MORE YEARS, CONTACT US [include all that apply]:
— BY TELEPHONE: 1-877-###–####
— ON THE WEB: www.—.com
— BY MAIL: check the box and complete the form below, and send the form to:
[Company name]
[Company address]
Renew my choice to limit marketing for [X] more years.

C–4 MODEL FORM FOR RENEWAL NOTICE (JOINT NOTICE)

[RENEWING YOUR CHOICE TO LIMIT MARKETING]/[RENEWING YOUR MARKETING OPT-OUT]

— The [ABC group of companies] is providing this notice.
— (Optional: Federal law gives you the right to limit some but not all marketing from the [ABC] companies. Federal law also requires us to give you this notice to tell you about your choice to limit marketing from the [ABC] companies.)
— You previously chose to limit the [ABC companies], such as the [ABC credit card, insurance, and securities] affiliates, from marketing their products or services to you based on your personal information that they receive from other [ABC] companies. This information includes your [income], your [account history], and your [credit score].
— Your choice has expired or is about to expire.

To RENEW YOUR CHOICE TO LIMIT MARKETING FOR [X] MORE YEARS, CONTACT US [include all that apply]:
— BY TELEPHONE: 1-877-###–####
— ON THE WEB: www.—.com
— BY MAIL: check the box and complete the form below, and send the form to:
[Company name]
[Company address]
Renew my choice to limit marketing for [X] more years.

C–5—MODEL FORM FOR VOLUNTARY “NO MARKETING” NOTICE

YOUR CHOICE TO STOP MARKETING
— [Name of Affiliate] is providing this notice.
— You may choose to stop all marketing from us and our affiliates.
— (Your choice to stop marketing from us and our affiliates will apply until you tell us to change your choice.)

To stop all marketing, contact us [include all that apply]:
— By telephone: 1–877–###–####
APPENDIX D TO PART 698—STANDARDIZED FORM FOR REQUESTING ANNUAL FILE DISCLOSURES.

REQUEST FOR FREE CREDIT REPORT

Note to Consumers: You have the right to obtain a free copy of your credit report once every 12 months (also known as an “annual file disclosure”), from each of the nationwide consumer reporting agencies. Your report may contain information on where you work and live, the credit accounts that have been opened in your name, if you’ve paid your bills on time, and whether you have been sued, arrested, or have filed for bankruptcy. Businesses use this information in making decisions about whether to offer you credit, insurance, or employment, and on what terms.

Use this form to request your credit report from any, or all, of the nationwide consumer reporting agencies.

The following information is required to process your request:

Your Full Name: ________________________________

Your Street Address: ________________________________

Your City, State & Zip Code: ________________________________

Your Telephone Numbers (with area code): Day: ________________________________

Evening: ________________________________

Your Social Security number: __________ Your Date of Birth __________

Place a check next to each credit report you want.

_____ I want a credit report from each of the nationwide consumer reporting agencies

OR

_____ I want a credit report from:

[ ] [name of nationwide consumer reporting agency]

[ ] [name of nationwide consumer reporting agency]

[ ] [name of nationwide consumer reporting agency]

Please check how you would like to receive your report. (Note: because of the need to accurately identify you before we send you your credit report, we may not be able to offer every delivery method to every consumer. We will try to honor your preference.)