

REQUEST TO AMEND RECORD OF PERSONAL INFORMATION FORM

TO: Save-On-Foods
19855 – 92A Avenue
Langley, British Columbia
V1M 3B6

Attention: Department: _____

I, _____, hereby request that the following personal information about me be corrected and completed, as the case may be, on the records of Save-On-Foods, a division of Save-On-Foods Limited Partnership ("SOF") to accurately reflect the correct and complete status of my personal information if SOF is satisfied, on reasonable grounds, to do so: _____

I furthermore request that SOF send corrected and completed personal information to each organization to which my personal information was disclosed in the prior twelve (12) months.

In the event SOF is not satisfied, on reasonable grounds, that it will amend my personal information, I confirm that SOF shall annotate my personal information with my above-noted request.

(Customer/Employee) Signature

Print name

Address

Telephone No.

Date