

# IMPORTANT PRIVACY CHOICES FOR CONSUMERS

## ***Your Records Are Safe With Us***

IF YOU HAVE PREVIOUSLY REQUESTED TO OPT OUT, YOU DO NOT NEED TO SEND THIS FORM AGAIN. THIS IS FOR NEW OPT OUT REQUESTS ONLY.

You have the right to control whether we share some of your personal information. Please read the following information carefully before you make your choices below.

### **YOUR RIGHTS**

You have the following rights to restrict the sharing of personal and financial information with outside companies that we do business with. Nothing in this form prohibits the sharing of information necessary for us to follow the law, as permitted by law, or to give you the best service on your accounts with us. This includes sending you information about some other products or services.

### **YOUR CHOICE**

**Restrict Information Sharing With Other Companies We Do Business With To Provide Financial Products and Services:** Unless you say "No," we may share personal and financial information about you with outside companies we contract with to provide financial products and services to you.

- The types of information we may share are names and addresses.
- We may share information with an insurance company.
- We may share information with CUNA Mutual Insurance Company.
- We may share information for the purposes of offering insurance products and financial services.

**NO**, please do not share personal and financial information with outside companies you contract with to provide financial products and services.

### **TIME SENSITIVE REPLY**

You may make your privacy choice(s) at any time. Your choice(s) marked here will remain unless you state otherwise. However, if we do not hear from you we may share some of your information with affiliated companies and other companies with whom we have contracts to provide products and services.

To exercise your choices do one of the following:

- Complete the information below, sign and send back this form to us using the envelope provided (you may want to make a copy for your records).
- Leave a voice message by calling this toll-free number: 877.MYPSFCU (697.7328).
- E-mail us at [privacy@mypsfcu.org](mailto:privacy@mypsfcu.org). Include your name, account number, and your privacy choice.

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Member/Joint Owner Name (*please print*)

\_\_\_\_\_  
Account Number(s)

X \_\_\_\_\_  
Member/Joint Owner Signature      Date

