Personal Data Request Form

Please complete the below form, and provide a copy of an identification document for confirmation of your identity (copy of identity card, passport or other publicly accepted identification document) in order to prevent the misuse of requests and submit this form by e-mailing to privacy@aboutbags.com. Please note that your right to request access, rectification or erasure is not absolute and may be declined in certain cases.

•	Your contact information:			
	First Name: Last Name: E-mail Address: Address: City: Country:	State:	Zip Code:	
•				
•	Please specify the type of request you are submitting:			
	I request to receive a copy of the personal data you hold about me.			
	·	Please provide us with additional information about your request which will help us providing you with the specific information you are looking for:		
	Please specify below the relevant period of time:			
	From/ to	/(DD/MI	M/YYYY)	

☐ I request that following personal data you hold about me are erased :
Please provide us with additional information why you wish to have data erased:
☐ If you have any other request, please provide us with additional information about your request which will help us to answer you request:
 Have you previously made a request? Yes No If Yes, on which date(s):
I warrant and represent that the above information is true and accurate, and that my request for such information is for personal use only.
Name: Date: Signature: