

Opt-Out Form

* denotes required fields

First Name: *

Street Address: *

Last Name: *

City: *

E-mail: *

State: *

Zip/Postal Code: *

☐ **Do not share my personal information with third parties**

☐ **Do not sell my information to third parties**

Users with disabilities (and any other users) who wish to opt-out of the sale of their personal information can also contact us by calling us at: 1-800-660-2550; emailing us at: privacy@leadingresponse.com; or sending us mail to: DisabilityApprovalHelp, 1701 Legacy Drive, Suite 2010, Frisco, TX 75034.

If we have a good-faith, reasonable and documented belief that a request to opt-out is fraudulent, we may deny the request.

Where you make a request to opt-out of the sale of your personal information through an authorized agent, we will require that you or the authorized agent provide us with a valid written authorization executed by both parties, with the validity of such document determined by us in our reasonable, good faith discretion. Please submit such documentation to us at: privacy@leadingresponse.com; or: DisabilityApprovalHelp, 1701 Legacy Drive, Suite 2010, Frisco, TX 75034.

For additional discussion of your privacy rights, please visit our Privacy Policy by [Clicking Here](#).