

INSTRUCTIONS AND GENERAL INFORMATION

Instructions:

- Print the Data Request Form and Attestation
- Complete the Data Request Form.
- Sign the Attestation below.
- Attach proof of identity and residence as specified in the Data Request Form.
- If you are making the request on behalf of another individual, attach proof that you are legally authorized to do so as specified in the Data Request Form.
- Mail to us the Data Request Form, Attestation, and attachments to:

Data Privacy Officer
18095 Serene Drive
Morgan Hill, CA 95037

Please email us at sah-privacy@sakata.com to let us know that you have mailed the Attestation Form and supporting documentation to us and the date on which it was sent.

Timeline:

We will endeavor to respond to your request expeditiously. Note, however, that we may need to require additional proof of identity depending on the sensitivity of the personal information involved. We may take up to 45 calendar days from the day we received your request to provide our response. If necessary, we may take up to an additional 45 days to provide our response. We will tell you during the initial 45 calendar days if we require extra time to complete your request and explain why.

Additional Information

- Where disclosure or deletion of information is not required by law or would adversely affect the rights of others, we may not be able to comply with your request, in which case we will inform you promptly and give you the reasons for our decision.
- Information covered by an evidentiary privilege recognized under California Law (including attorney-client communications privilege and work product privilege) cannot be disclosed.
- We are required to comply with the CCPA rules which are currently in the process of being finalized. Among other things, the current version of those rules require us to “not at any time disclose in response to a request to know a consumer’s Social Security number, driver’s license number or other government issued identification number, financial account number, any health insurance or medical identification number, an account password, or security questions and answers, or unique biometric data generated from measurements or technical analysis of human characteristics.”
- We will maintain records of requests received that include the date of request, nature of request, manner in which the request was made, the date of our response, the nature of our response, and the basis for any denial of the request if it is denied in whole or part.

To help us respond to your request, please consider providing the following information:

Identify your relationship with Sakata Seed America, Inc.:

- Employee/Former Employee
- Customer
- Vendor/Supplier
- Other (please identify): _____

NOTE: You are not required to provide these details under the law, but doing so would help us process your request.

CALIFORNIA CONSUMER PRIVACY ACT (CCPA) DATA REQUEST FORM

Organization to which your request relates:

Sakata Seed America, Inc. company/affiliate to which your request relates:

Rights you are requesting:

Please identify the **CCPA** right(s) you are exercising:

- **Right to Know** (categories of data we hold, purposes for sharing, and third parties with whom the data is shared)
- **Right to Know** (specific pieces of information)

Please consider providing the following information related to the specific pieces of information you are requesting access to:

Name of the relevant records you are requesting access to:

Type of records (e.g., electronic communication, billing, transactional)

File numbers, and any other information to help us locate the information.

NOTE: You are not required to provide these details under the law, but doing so would help us process your request.

- **Right to erase**

Please consider providing the following information related to your request:

Name of the relevant records you are requesting erased:

Type of records (e.g., electronic communication, billing, transactional)

File numbers, and any other information to help us locate the information.

NOTE: You are not required to provide these details under the law, but doing so would help us process your request.

Additional information and supporting documentation:

A. In all cases, regarding the individual to whom the requested information relates please provide:

- Name and last name: _____
- Current address: _____
- Proof of residence (such as a copy of a recent utility bill or identification card demonstrating residence in California). [Please enclose with this form.]
- Contact details (preferably an email address): _____

NOTE: please do not submit contact details for minor if requesting on behalf of a minor (see below).

B. If requesting as an authorized agent, in addition to the information in A. above, please provide:

- Proof of authorization to represent the individual to whom the requested information relates. [Please enclose with this form]
- Name and last name of the authorized agent: _____
- Contact details (preferably an email address) _____

C. If requesting as a parent or guardian on behalf of a child, in addition to the information in A. above, please provide:

- Official document demonstrating proof of your relationship to the minor (e.g., a birth certificate). [Please enclose with this form.]
- Full name of the parent/guardian: _____
- Contact details of the parent/guardian (preferably an email address): _____

Other:

Please provide any other details you would like to share with us regarding you or your request:

ATTESTATION

I declare under penalty of perjury that the information given by me in the attached Data Request Form and enclosed documents is correct to the best of my knowledge, and that I am entitled to make the request to which this attestation relates under the CCPA.

[Please include signature]