

Mail-In Form

If you have a joint account, your choice will apply to everyone on your account unless you mark below.

Apply my choices only to me.

Mark any/all that you want to limit:

Do not share information about my creditworthiness with your affiliates for their everyday business purposes.

Do not allow your affiliates to use my personal information to market to me.

Do not share my personal information with non-affiliates to market their products and services to me.

Name: _____

Address: _____

City, State, Zip: _____

Account Number: _____

MAIL TO: Innovate Loan Servicing Corp., ATTN: LEGAL PO BOX 164818, Fort Worth, TX 76161