

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Your Account Number, if applicable]

[Date]

[Name of Financial Institution/Company]  
[Privacy Department Address]  
[City, State, Zip Code]

**Subject: Notice of Opt-Out Regarding Joint Marketing Data Sharing**

To Whom It May Concern,

I am writing to formally request that you limit the sharing of my personal information under the terms of your privacy policy. Specifically, I am exercising my right to opt-out of the following:

- The sharing of my personal information with non-affiliated third parties to market to me under a joint marketing agreement.
- The sharing of information about my creditworthiness with your affiliates for their everyday business purposes.

Please update my account preferences immediately to reflect this choice. I understand that this request will remain in effect until I notify you otherwise in writing.

Please send me a written confirmation once this request has been processed and my records have been updated.

Sincerely,

[Signature]

[Your Printed Name]