

Section 3: Signature

Please check one:

- ☐ I **request** additional written communications regarding the resolution of this issue.
- ☐ I **do not request** additional communications regarding resolution of this issue.

I certify that the statements made in this complaint are true and correct to the best of my knowledge.

Signature: _____ Date: _____

Please complete this form and mail it to:

Privacy Officer
333 Butternut Street
Syracuse, NY 13214