



Sphir Opt-Out Notice Form

IT IS YOUR RESPONSIBILITY TO MAIL THE OPT-OUT NOTICE TO US WITHIN 30 DAYS OF CREATING YOUR USER ACCOUNT.

I am providing this Opt-Out Notice pursuant to the Sphir Terms. All information requested below is required for the Opt-Out Notice to be effective.

Your Name: _____

Your Legal Residence Street Address: _____

Your Legal Residence City: _____

Your Legal Residence State: _____

Your Legal Residence Zip Code: _____

Phone Number: _____

Mailing Address (if different): _____

Sphir account name and email address for which I am providing the Opt-Out Notice:

Account name: _____

Account email address: _____

I am writing to Opt-Out of one or more of the following: (check all that apply)

_____ My Agreement to Arbitrate.

_____ My waiver of rights to participate in class, collective, or private attorney general actions or arbitration proceedings relating to all Disputes.

(Continued next page)

Signed Declaration

The undersigned hereby confirms and declares, under penalty of perjury, that the above information is correct and complete, that the undersigned is the owner of and/or is authorized to Opt-Out on behalf of the account listed above, and that this Opt-Out Notice is postmarked no later than 30 days after the date on which the user of the account listed above accepted the Sphir Terms for the first time.

Signature: _____

Printed Name: _____

Title (if any): _____

Date: _____

Please mail the completed and signed Opt-Out Notice Form to:

**Supirb Technologies, LLC
Attn: Opt-Out Notice
24 Roy Street, No. 316
Seattle, WA 98109
USA**