

Experian  
Opt Out  
PO Box 919  
Allen, TX 75013

***Re: Opt-Out Request***

To whom it may concern:

I request to opt out from pre-screened credit and insurance offers and have my name removed from your company's marketing lists. The following information is provided exclusively to facilitate my request.

<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>LAST NAME</b>	<b>SUFFIX</b>
<b>CURRENT MAILING STREET ADDRESS</b>			
<b>CURRENT MAILING CITY / STATE / ZIP</b>			
<b>PRIOR MAILING STREET ADDRESS (IF MOVED IN LAST 6 MONTHS)</b>			
<b>PRIOR MAILING CITY / STATE / ZIP</b>			
<b>SOCIAL SECURITY NUMBER</b>		<b>BIRTH DATE</b>	

Thank you for your prompt attention to my request.

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**DATE**