

Consumer Affidavit of Identity

Instructions: Please complete and sign this *Consumer Affidavit of Identity* (the "Affidavit"). Edmunds.com, Inc. ("Edmunds") cannot accept the Affidavit without your signature. Please mail the signed Affidavit to Edmunds.com, Inc., 2401 Colorado Ave., Santa Monica, CA 90404, Attn: General Counsel, or you may email a scanned copy to CCPArequests@edmunds.com.

1. I, _____ [first and last name] am a California resident ("Consumer") and do hereby declare and certify that I reside at

_____ [street address] in

_____ [city/town] in the State of California.

2. I am the registered customer for telephone number (including area code):

and for the following email address(es): _____.

3. I submitted a request under the California Consumer Privacy Act to Edmunds on

_____ [month/date/year] in order to obtain

information, deletion or opt-out rights on behalf of myself.

I swear or affirm, under penalty of perjury, that this statement is true and correct.

Signature: _____

Print Name: _____