DATA SUBJECT CONSENT WITHDRAWAL FORM IN ACCORDANCE WITH THE PROTECTION OF PERSONAL INFORMATION ACT NO. 4 OF 2013 (POPIA)

I/We,	(Data Subject Name) as defined in POPIA, would like to
withdraw my/our conse	ent to process my/our Personal Information as defined in POPIA by ading As Callpay South Africa ("Callpay").
• • •	nger has my/our consent to process my/our Personal Information for
the purpose of :	
	on of processing Personal Information), which was previously granted.
	ent Withdrawal Form does not affect the lawfulness of the processing up to the point of receipt of the Consent Withdrawal Form by the
Please provide the follo	wing Information to help us identify you in our systems:
My/Our Personal Inform	nation, as Data Subject, is as follows:
Name or Legal Entity Na	me:
ID Number or Registrati	on Number:
Address: Contact Numb	er/s:
E-mail:	
Relationship to Respons	ible Party:

Signed at	on this	day of	20
Name of Data Subject:			
Signature:			

Kindly send this Consent Withdrawal Form to the Information Officer of Callpay South Africa at e-mail: who@callpay.com. Please note that if the Consent Withdrawal Form is not sent to the above email address, it will not be processed.

