## Instructions:

In accordance with the VF Corporation Privacy Policy Statement (available at: https://www.vfc.com/privacy-policy and our How to Exercise Your Privacy Choices webpage (available at: https://www.vfc.com/privacy-requests) ("you" or "your") are permitted to make requests and exercise rights relating to your personal information that has been collected by VF Corporation and its subsidiaries and brands ("Affiliates").

The purpose of this form is to verify your identity in connection with your privacy request submitted at https://www.vfc.com/privacy-requests or by U.S. or Canadian mail.

Please complete the following steps:

- **1.** The Declaration (page 2) must be completed and signed by you unless you have given an authorized agent a valid Power of Attorney.
- 2. You or your authorized agent must include a form of photo identification (paragraph 4, page 2). You must redact (black out) any identifying information other than your photograph, name and address.
- **3.** If the Declaration is completed and signed by an authorized agent pursuant to a valid Power of Attorney, you must provide a copy of the Power of Attorney.
- **4.** Please return the signed Declaration of Identity to us at Consumer\_Privacy\_US@vfc.com or mail to us at VF NORA Consumer Privacy Office at 105 Corporate Center Blvd., Greensboro, NC, USA 27408.

If you would like to learn more about how VF handles consumers' personal information, please read our Privacy Policy Statement at https://www.vfc.com/privacy-policy. If you have any additional privacy inquiries or concerns, please contact us at Consumer\_Privacy\_US@vfc.com.

COU	NTRY:	)	
COUNTRY:		DECLARATION IN RE: PRIVACY REQUEST	
	re as follows:	)	
1.	I am over 18 years of age, of sound mind, and otherwise competent to make this Declaration. The evidence set out in the foregoing Declaration is based on my personal knowledge.		
2.	My full and legal name is:		
3.	My current legal address is (street, city / municipality, state/province & zip):		
4.	As verification of my identity, I have enclosed a form of photo identification (check applicable form of identification below). I have redacted (blacked out) all identifying information other than my photograph, name and address.		
Туре	of Photo Identification:		
☐ Dri ☐ ID ☐ Scl ☐ Vo' ☐ U.S ☐ Mil ☐ U.S ☐ Na ☐ Fol ☐ Fol ☐ Ca ☐ Dri ☐ Ca ☐ Ca ☐ Oth		agencies or entities  ID) card  stration Receipt Card  ard  vince or territory of Canada	
5.	Upon information and belief, VF Corporation a page 1) has collected my personal information.	nd, or one of more of its Affiliates (as defined on	
6.	I provide this Declaration to verify that I am the individual named above for purposes of a privacy request sent to VF Corporation, and to confirm that I wish to exercise the privacy request submitted at https://www.vfc.com/privacy-requests or via U.S. or Canadian mail.		
I decla	re UNDER PENALTY OF PERJURY that the fore	going is true and correct.	
Signati	ure:	Date:	