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To the Data Protection Officer of Sowre SA Corso San Gottardo 54/A 6830-TI Chiasso (Switzerland)

Email: francesco.tagliabue@legaliassociati.it

## FORM FOR REPORTING ISSUES RELATED TO PERSONAL DATA PROTECTION (Articles 38 of Regulation (EU) 2016/679)

The undersigned (Surname and Name)		
Address	( ( )	
	Telephone	
Email		
Identification document:		
Type of document (ID card/passport/driving license): _		
	_ Expiry date;	
□ On my behalf		
$\hfill\Box$ On behalf of the person I represent or legally assist:		
Surname and Name		
Address	( ( )	
Tax code	reiephone	-
Email		
Identification document:		
Type of document (ID card/passport/driving license): _		
Document number	_ Expiry date	
$\hfill \square$ In the exercise of parental responsibility;		
□ In the capacity of	_ (guardian/curator/support administrator), by	
virtue of the order of the Guardianship Judge of the Co	ourt of;	
R.G. number	of/; representation or legal assistance of the person for whon	
(indicate the role of the person acting and the powers	derived from teg	
	onal data of Sowre SA, also provided to the data subject a e processing of the following personal data (indicate the	
pursuant to Art. 38, par. 4, of Regulation (EU) 2016/67	9	
the following issue related to the processing of person Regulation:	REPORT al data or the exercise of rights deriving from the aforem	entioned

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WARNING: THIS CONSTITUTES A MERE REPORT AND DOES NOT REPRESENT THE EXERCISE OF THE RIGHTS PROVIDED FOR IN ARTICLES 15 TO 22 OF THE GDPR, FOR WHICH IT IS NECESSARY TO SUBMIT A REPORT DIRECTLY TO THE COMPANY USING THE APPROPRIATE FORMS.						
Contact information for response  Postal address:	_					
Street/Square: City: (	<del></del>					
or Email/Email PEC	<b>_</b> '					
The undersigned also specifies the following (provide any useful explanations or indicate any attached Documents):	_					
Place and date Signature of the notifier						