

CONSUMER REPORT REQUEST FORM

I hereby request that Acxiom Corporation provide a copy of the information you have in your InfoBase™ and DataQuick® Reference Products. I understand there are three products which may or may not have individual information about me in them. They are:

- InfoBase™ TeleSource
- DataQuick Property Services
- Acxiom Verification Service

I understand that the only use Acxiom will make of the information I am providing on this form will be for the purpose of retrieving information from Acxiom's InfoBase™ and DataQuick Reference Products.

<p>Name Information: Full name and all variations of my name that I regularly use (i.e. nick names, former names, married name, common misspellings).</p> <p>Name _____</p> <p>Name _____</p> <p>Name _____</p> <p>Name _____</p>	<p>Telephone Numbers: All telephone numbers at which I wish information retrieved.</p> <p>A/C _____ Phone _____</p> <p>A/C _____ Phone _____</p> <p>A/C _____ Phone _____</p> <p>E-mail _____</p> <p>E-mail _____</p>
<p>Address Information: All addresses at which I wish information retrieved.</p> <p>1) Address _____</p> <p>_____</p> <p>City _____ State _____ Zip _____</p> <p>2) Address _____</p> <p>_____</p> <p>City _____ State _____ Zip _____</p>	<p>Additional Address Information:</p> <p>3) Address _____</p> <p>_____</p> <p>City _____ State _____ Zip _____</p> <p>4) Address _____</p> <p>_____</p> <p>City _____ State _____ Zip _____</p>

Signed: _____ Date: _____

Enclosed is a check for \$5.00.

Send this form and check to:
 Consumer Advocate, Consumer Advocate Report Department, Acxiom Corporation
 301 Industrial Blvd., P.O. Box 2000, Conway, AR, 72033-9928