

To the Data Protection Officer of BS4 SA Corso San Gottardo 54/A 6830-TI Chiasso (Switzerland)

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

The undersigned (Surname and Name)	
Address	City ()
	Telephone
Email	
Identification document:	
Type of document (ID card/passport/driving license	e):
Document number	Expiry date
☐ On my behalf	
$\hfill\Box$ On behalf of the person I represent or legally ass	ist:
Surname and Name	
	City ( )
	Telephone
Email	
Identification document:	
Type of document (ID card/passport/driving license	r):
	Expiry date
☐ 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	e Court of
R.G. number	of/;
$\hfill\Box$ In the exercise of the following role that involves	s the representation or legal assistance of the person fo
whom action is taken (indicate the role of the person	on acting and the powers derived from it)



		ersonal data of BS4 SA, also provided to the d	_
		site, regarding the processing of the followi and the processing referred to):	ng persona
pursuant to Art. 38, par. 4, of F	egulation (EU) 2016/679		
	RI	EPORT	
the following issue related t aforementioned Regulation	, , ,	onal data or the exercise of rights deriving fr	om the
	S 15 TO 22 OF THE GDP	ID DOES NOT REPRESENT THE EXERCISE OF TREE, FOR WHICH IT IS NECESSARY TO SUBMITATE FORMS.	
Contact information for resp	oonse		
Postal address:			
	City:		(
or Email/Email PEC			
	es the following (provid	le any useful explanations or indicate any	
attached Documents):	0	, , , ,	
Place and date	Sign	ature of the notifier	