



**GRAHAM**  
ADVISORY CORPORATION

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## Graham Advisory Corporation Privacy Notice

Dear Employee Benefit Participant:

First of all, we want to thank you for allowing us the opportunity of serving your insurance needs. We appreciate the ensuing trust that you will be placing in us.

Due to the Gramm-Leach-Bliley Privacy Act passed by the U.S. Congress, as well as amendments to Arizona's existing laws governing the privacy of personal information gathered in context of an insurance transaction, we are issuing you the following notice.

**Information we may obtain.** The type of information we obtain depends on the type of product of service we are providing.

**Personal Information.** Personal information includes identifying information, such as, your name, address, telephone number, and demographic data about you. This may include information from persons other than you or those proposed for insurance coverage, such as an attending physician statement from your medical practitioner.

**What we do with the Information we obtain.** We use the information about you to facilitate your request for insurance products or services. This information may be shared with a prospective insurance company in an effort to secure you an insurance product or service without your written authorization. Personal information will not be sold or shared by our office for any other purpose than to secure requested insurance products or services.

**Right to the Information.** You, as a prospective insured, have a right to access the information that is collected and to make any corrections to this personal information.

**In the event of an Adverse Underwriting Decision.** If you should receive a denial of coverage, you may request, in writing, within 90 business days from the post-mark date of the notice or other communication the reason for the denial. The insurance carrier shall respond to you within 21 business days from the date they receive your written request.

If you should have any additional questions about our information practices, please contact us at the address below and include a copy of your personal identification, such as driver's license or photo identification.

Privacy Official  
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