

Request for rectification of data on the FHRB personal data file

REQUEST FOR RECTIFICATION OF DATA ON THE FHRB PERSONAL DATA FILE

Print the form and fill in the requested information. Don't forget to sign the form.

Send the signed form to:
Finnish Red Cross, Blood Service / FHRB
Kivihaantie 7, 00310 Helsinki

I request the rectification of my personal data held by FHRB
Data to be rectified:
Name
Personal ID code
Telephone number
Address
Post code and post office
Date, signature and name in print

To be filled in by the Blood Service

Request for rectification received, date and confirmation	
Data rectified, date and confirmation	
Data subject notified, date and confirmation	
Other information	