Biometric Identifier Collection Authorization Form

TruMed Systems, Inc. will capture and use your [fingerprints] to control access into AccuVax and/or AccuShelf. Your[fingerprint] data will not be disclosed by TruMed Systems, Inc., except to a Biometric Identifier Collection vendor or licensor, without your consent unless the disclosure is required by law or by valid legal subpoena. If retained, your fingerprint data will be permanently deleted from TruMed Systems' files within six months of when the initial purpose of obtaining such Biometric Information has been satisfied or within 12 months of non-use, as provided in the retention schedule set forth in the Company's Biometric Information Policy, a copy of which is attached hereto and is posted online at:

https://trumedsystems.com/privacy-policy/

By accepting the voluntary opt in below, you acknowledge that you have read the Policy and you consent to TruMed System's collection, use, and storage of your [fingerprint] for the above stated purpose.

You do not need to accept the consent, but if not you will need to log in using your log-in email and password.

Accept Decline

Biometric Identifier Collection Authorization Form

You are trying to log into a TruMed Systems, Inc. systems unit using Biometric log-in. TruMed Systems, Inc. requires Biometric data storage and use consent to continue to use this log in method.

Continued use of this function will allow us to capture and use your [fingerprints] to control access into AccuVax and/or AccuShelf. Your[fingerprint] data will not be disclosed by TruMed Systems, Inc., except to a Biometric Identifier Collection vendor or licensor, without your consent unless the disclosure is required by law or by valid legal subpoena.

If retained, your fingerprint data will be permanently deleted from TruMed Systems' files within six months of when the initial purpose of obtaining such Biometric Information has been satisfied or within 12 months of non-use, as provided in the retention schedule set forth in the Company's Biometric Information Policy, a copy of which is attached hereto and is posted online at:

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By accepting the voluntary opt in below, you acknowledge that you have read the Policy and you consent to TruMed System's collection, use, and storage of your [fingerprint] for the above stated purpose. You also release any past or future claims against TruMed Systems for capture and use of this information.

You do not need to accept the consent, but if you do not accept, you will need to log in using your login email and password going forward and your Biometric data will be deleted per our Biometric Information Policy.

| Accept | Decline |
|--------|---------|
|--------|---------|