<u>委任状は、手続きを委任する方がすべての欄を自筆でご記入およびご捺印ください。</u>

The person who is delegating the procedures must fill out all the fields of the letter of proxy in his/her own handwriting and affix his/her seal.

Letter of Proxy (For Remittance)

		7
(Date)		

次の取り扱いを委任します。 I delegate the request as follows.

委任者(名義人) Delegator (account holder)	おところ Address	郵便番号 Postal Code ())	
	おなまえ Name	お圃上印 Registered Seal/Signature	
受任者(代理 Delegatee (proxy)	おところ Address	郵便番号 Postal Code (
(代理人)	おなまえ Name		

- * Please check the appropriate boxes below.
- * Please circle the delegated service.

Check	委任する内容 Delegated service			
	(通常払込み Ordinary in-payment /電信払込み Telegraphic inpayment)	Paginiant goda number		
		金 額 Amount	Yen	
		受取人口座記号番号	When making a remittance to another bank, please enter the financial institution name, branch name, account type, and account number.	
		Recipient account code number		
	(電信振替 Telegraphic transfer / 他行送金 Remittance to another	受取人力ナ氏名 Recipient's name in kana		
	bank)	払出口座記号番号 Payment account code number		
		依頼人力ナ氏名 Applicant's name in kana		
		金 額 Amount	Yen	
				

(Note)

- If the request does not require a registered seal (except for requests to reset the number of incorrect PIN entries), the delegator may use any of his/her seals.
- A proxy following the request based on this letter of proxy must bring his/her seal and identification documents issued by public agencies that include the proxy's name and address.
- Depending on the delegated service, the proxy may also be required to affix the delegator's seal to other documents and present identification documents issued by public agencies that include the delegator's name and address.

 We may contact the delegator in person by phone to confirm the delegated service when accepting the request from the proxy. Please note that in the case that we cannot confirm the delegation, we cannot accept the request.
- Please note that we may not be able to accept your request if the information entered is incomplete.
 The person who is delegating the procedures must fill out all the fields in his/her own handwriting and affix his/her seal.

• Please do not use an erasable ballpoint pen to fill out this form.					
<for office="" use=""></for>					
備	委 口確認年月日	年	月	日	受
考	確認 口確認時刻	時	分		付