

Power of Attorney for the Request for Disclosure, etc. of Personal Information

Date / /

Principal

Name	<i>(Please sign up)</i>
Current Address	Postal code:
	<i>Please indicate the name of a building, an apartment, etc.</i>
Phone Number	- -
E-mail	<i>(If available)</i>

I, *(name of the principal)*, hereby designate the following person as my agent and delegate to him/her the authority to request notification of the purpose of use, disclosure, correction, addition or deletion of the content, discontinuation of use, deletion, and discontinuation of provision to third parties of my personal information held by AGASUS co.,inc.

Agent

Name	
Current Address	Postal code:
	<i>Please indicate the name of a building, an apartment, etc.</i>
Phone Number	- -
E-mail	<i>(If available)</i>