



## JCM Modalities of Communication Statement Form

Section 1: Project description	
Title of the project	Installation of Tribid System to mobile communication's Base Transceiver Stations in Republic of Indonesia
Country	Indonesia
Date of Submission	24/01/2018

Section 2: Nomination of focal point entity(ies)	
<b>Name of entity:</b> KDDI CORPORATION <b>Address (incl. postcode):</b> GARDEN AIR TOWER, 3-10-10, Iidabashi, Chiyoda-ku, Tokyo 102-8460, Japna <b>Telephone:</b> N/A <b>Fax:</b> N/A <b>E-mail:</b> N/A <b>Website:</b> <a href="http://www.kddi.com/english">http://www.kddi.com/english</a>	
<b>Primary authorised signatory:</b> Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> <b>Last name:</b> Ito <b>First name:</b> Keiji <b>Title:</b> Head of Global ICT Business Division <b>Specimen signature:</b>  <b>Date:</b> dd/mm/yyyy 12/01/2018	
<b>Alternate authorised signatory:</b> Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> <b>Last name:</b> Hiroshi <b>First name:</b> Uchida <b>Title:</b> General Manager of Global ICT Business Promotion Department <b>Specimen signature:</b>  <b>Date:</b> dd/mm/yyyy 12/01/2018	
<b>Contact person:</b> Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> <b>Last name:</b> Youichi <b>First name:</b> Iriuchijima <b>Title:</b> Senior Manager of Global ICT Business Promotion Department <b>Department:</b> Global ICT Business Promotion Department <b>Mobile:</b> +81 80 5943-9608 <b>Direct tel.:</b> +81 3-6678-0872 <b>E-mail:</b> yo-iriuchijima@kddi.com <b>Direct fax:</b> +81 3-6678-0230	
<b>USE THIS SECTION FOR POST-REGISTRATION</b>	Is this entity changing its name? Yes <input type="checkbox"/> (Former entity name: ) No <input type="checkbox"/>
	Is the entity also a project participant? Yes <input type="checkbox"/> No <input type="checkbox"/>

If the entity is also a project participant, do the same signatories represent it in its project participant role?	Yes <input type="checkbox"/> No <input type="checkbox"/>
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\*Tables should be added, if more than one focal points are designated.

Section 3: Third-party entity (TPE)			
<b>Name of the TPE that conducts validation (and verification) for the project:</b>	JAPAN	QUALITY	ASSURANCE
	ORGANIZATION		
<b>Address (incl. postcode):</b> 1-25,Kandasudacho,Chiyoda-ku,Tokyo 101-8555,Japan			
<b>Contact person:</b>	<b>Mr.</b> <input checked="" type="checkbox"/>	<b>Ms.</b> <input type="checkbox"/>	
<b>Last name:</b> Tanabe	<b>First name:</b> Koichiro		
<b>Title:</b> Manager			
<b>Department:</b> Global Environment Department			
<b>E-mail:</b> tanabe-koichiro@jqa.jp	<b>Telephone:</b> +81-3-4560-5527		

Section 4: List of project participants other than nominated focal point entity(ies)	
	Name of project participant
(1)	PT XL Axiata Tbk.
(2)	
(3)	
(4)	
(5)	
(6)	

\*Rows may be added, as needed

\*Contact information of each participant is indicated in Section 5.