Request form for Personal Information Disclosure

Date: / / (MN	M/DD/YYYY)
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Horikawa Higashiiru, Shiokoji-Dori, Shimogyo-Ku, Kyoto, 600-8530 JAPAN To: Omron Corporation, Brand Communications Department

- * Please attach the required personal identification document etc., fill in the necessary matter below and enclose a reply envelope stating the address of yourself (the address stated on the person's identity confirmation document) Please send by mail (shipping costs borne by the claimant). In the case of notice of use purpose or request for disclosure, please attach a stamp for registered mail with delivery certificate to the return envelope.
- * The inside of the thick frame is a required item to write. Please note that there is no omission.

	Name	
Individual	Date of birth	/ / (MM/DD/YYYY)
	Address	〒 —
	Phone No.	() –
	Identification document	Please enter the name of the document to be attached. (
	Name	
Proxy	Traine	
	Proxy's Address (Office)	
	Phone No.	() –
	Type of proxy	 Agent by the Delegation Parental guardian Guardian of an Adult
	Document to prove the identity of proxy	Please enter the name of the document to be attached.
	Identification document	Please enter the name of the document to be attached.

(Note) Please fill in only when the agent requests.

Please obviou	fill in when the company nar	ne or business	division name	to be requested becomes			
000100	is.						
Please	Please circle in the corresponding number of the request and fill in the contents.						
	uest for Notification of Usage rmation Protection Act	Purpose under	Article 27, Pa	ragraph 2 of the Personal			
2. Request for disclosure of personal information under Article 28, Paragraph 1 of the Personal Information Protection Act							
	Please specify what kind of information on the subject you are requesting for						
disc	closure, specifically as mu	ch as possible	9				
0 D.		1	· 1 . 1 A	21.00			
	quest for correction etc. of per Personal Information Protecti		10n based on A	rticle 29, paragraph 1 and 2			
01 0110 1	A Correction	IOII Law					
	Correction item	Contents (befo	ore correction)	Contents (after correction)			
Cl							
assi							
Classification							
tion	B Add						
of n	additional item	Addi	tional content ·	Reason for addition			
neth							
ods							
rela							
ted	C Delete						
to cl	Deleted items / contents		Reason for deletion				
of methods related to claims							
σ							

(Note) Please circle the corresponding symbols of A to C, fill in the correction items / details, additional items / contents / reasons, deletion items / contents / reasons.

4. Request for suspension of use of personal information etc. pursuant to Article 30, paragraph 1 and 2 of the Personal Information Protection Act.

	A Utilization Cease				
	① Usage exceeding the range necessary for attaining purpose of use (use outside				
	purpose)				
Classification of methods of usage per claim	②Obtained by improper means				
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of:	D. D.				
me	B Erase				
tho	①Use beyond the range necessary for attaining purpose of use (use outside purpose)				
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е р	②Obtained by improper means				
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lain					
Ω					
	C Provided by a third party (seeking affiliated parties or providing methods and				
	suspension)				

(Note) Please circle the corresponding symbols of A to C, and please explain the reason for each.

* The suspension offered by third parties is also provided to the general public (e.g. Publish on website).

Therefore, if you request to stop offering to an unspecified majority of people, please also describe how to provide.