Personal Data Request Form

- ☐ notification of purposes of use
- ☐ disclosure   ☐ amendment
- ☐ additions   ☐ deletion
- ☐ termination of use   ☐ deletion
- ☐ termination of provision to third parties

date: (year/month/date)   /   /

Attention: TOA Pharmaceuticals Co., Ltd.

Based upon the Act on the Protection of Personal Information, I hereby submit a request for my personal information (personal data) held by TOA Pharmaceuticals Co., Ltd. as follows:

Requestor	(address) —	
	(name)(pronounciation)	phone ( ) —
	personal identification documents included (copy of one of following documents) ☐ drivers' license ☐ passport ☐ insurance card ☐ registration card ☐ basic resident registration card ☐ pension book ☐ other ( )	
Disclosure request range	＜please fill in below when requesting disclosure＞	
Reason for request	☐ data is inaccurate ＜in case of amendment, addition, or deletion＞ ☐ illicit procurement of data＜in case of termination of use or deletion＞ ☐ processing for reason other than specific use ＜in case of termination of use or deletion＞ ☐ data provided to third party without permission ＜in case of termination of third party provision＞ ☐ reason other than above)	

Request details	amendments	item :
		amendment details –
		  before amendment :
		
		  after amendment :

	additions	item : addition details :
	Deletions	item :

(note:) Our response to the this request will be mailed to the above requestor by certified mail.