

Date: _____ [MM] [DD], [YYYY]

To: Contact for Inquiries Concerning Protection of Personal Information
Toshiba Information Systems (Japan) Corporation

Request Form for Personal Information Disclosure

Requester (State the name of the agent if the request is made by the agent.)

Relationship with the person to whom the personal information refers	<input type="checkbox"/> The person to whom the personal information refers <input type="checkbox"/> Agent <input type="checkbox"/> The person delegated by the person to whom the personal information refers <input type="checkbox"/> Legal representative (such as a person with parental authority)
Phonetic transcriptions in kana	
Name	Seal
Tel	() - (State a telephone number with which we can reach you from 9:00 to 17:00 on weekdays)
Email address	(To be used if we cannot reach you on the phone during the period referred to above or in other similar cases)

I hereby make the following request with respect to the personal information held by you pursuant to the Personal Information Protection Act:

1. Matters Concerning the Person to Whom the Personal Information Refers

Person subject to disclosure	Phonetic transcriptions in kana	
	Name	Seal
	Zip code	〒 -
	Phonetic transcriptions in kana	
	Address	
	Tel	() - (State a telephone number with which we can reach you from 9:00 to 17:00 on weekdays)
Type of the request (Circle the applicable item.)	1. Disclosure of personal information or records of disclosure to third parties; 2. Notification of the intended purpose of use of personal information; 3. Correction; 4. Addition; 5. Deletion; 6. Cessation of use; or 7. Cessation of disclosure to third parties. State the reason of the request specifically. (e.g., an error in the personal information or unintended use of the personal information without obtaining the person to whom the personal information refers) -----	
How the requester wishes to receive the disclosure	1. In writing; 2. Email (with documents attached); 3. CD-ROM or other similar media (sent by postal mail); 4. Other (State the specific method with which the requester wishes to receive disclosure.) -----	
Identity confirmation document (Circle the document that has been enclosed.)	1. Driver's license; 2. Health insurance card; 3. Passport; 4. Pension booklet; 5. Resident registry with photograph; or 6. Copy of the alien registration card. (If you choose to use any of the documents listed in 1. through 5., enclose a copy thereof.)	

2. How the Personal Information Was Provided to Toshiba Information Systems

(Circle the applicable item and state the name of the service or product specifically.)

Number		* State the name of the email magazine, seminar or exhibition, the date when the event was held, the name of the service, etc.
1	Subscription to an email magazine	
2	Request for materials	
3	Questionnaire or registration for a monitoring program	
4	Sign-up for a seminar	
5	Entry registration for an exhibition	
6	User registration or user card	
7	Repair order	
8	Inquiries	
9	Other	

3. How Toshiba Information Systems Has Contacted the Person to Whom the Personal Information Refers (State the name of the service, etc. specifically and circle the applicable item.)

In connection with [] (State the name of the service or product, etc.),	
1. Toshiba Information Systems has sent direct mails to the person;	2. Toshiba Information Systems has sent emails to the person;
3. Toshiba Information Systems has made phone calls to the person;	4. Toshiba Information Systems has visited the person; or
5. Other []	

4. Disclosure of Personal Information or Records of Disclosure to Third Parties (State the specific items of the personal information or records of disclosure to third parties requested to be disclosed.)

Items of the personal information or records of disclosure to third parties (e.g., name, address and telephone number)

5. Correction of Personal Information (If you request correction, state the details thereof.)

Items of the personal information (e.g., name, address and telephone number)	Before correction	After correction

6. Addition of Personal Information (If you request addition, state the details thereof.)

Items of the personal information (e.g., name, address and telephone number)	Details of the personal information to be added

7. Deletion of Personal Information (If you request deletion, state the details thereof.)

Items of the personal information (e.g., name, address and telephone number)	Details of the personal information to be deleted

8. Cessation of Use of, or Cessation of Disclosure to Third Parties of, Personal Information (If you request cessation of use of, or cessation of disclosure to third parties of, personal information, state the details thereof.)

Name and other details of the specific service with respect to which you request cessation of use of, or cessation of disclosure to third parties of, personal information

* Fee and postage charges

If you request disclosure of personal information or records of disclosure to third parties or notification of the intended use, please enclose a postal money order in the following amount as a fee.

Fee	800 yen
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- No fee is charged if you request correction, addition, deletion, cessation of use of, or cessation of disclosure to third parties of personal information.
- You are requested to bear the cost of purchasing the postal money order and of postage to send this request form to Toshiba Information Systems.

[To be used by Toshiba Information Systems]

Date of receipt	[MM] [DD], [YYYY] at []:[]
Identity confirmation of the person to whom the personal information refers	1, 2, 3, 4, 5 or 6
Identity confirmation of the agent	1, 2, 3, 4, 5 or 6
Confirmation of the fee	<input type="checkbox"/> Attached <input type="checkbox"/> Insufficient <input type="checkbox"/> Not attached <input type="checkbox"/> Not required
Date when the response was sent	[MM] [DD], [YYYY]

Administrative Office

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