Request for Disclosure of Retained Personal Data Form

Day Month Year

Personal Information/Individual Number Consultation Office Sumitomo Pharma Co., Ltd.

| (Requester) Name: | | | SEAL |
|-------------------|----------|---|------|
| Address: | <u> </u> | | |
| | | | |
| | | | |
| Telephone | (|) | |

Under my rights stipulated in Article 33, Paragraph 1 of the Act on the Protection of Personal Information, I hereby request disclosure of the items of personal information related to myself as described below (or disclosure that no such personal information related to myself is retained by your company if true).

- 1. Requester's relationship to the company (e.g. type of transactions undertaken, connection to company, etc.)
- 2. Scope of Request
 - (1) List of items you wish disclosed
 - (2) List of content you wish disclosed
- 3. Method of Disclosure

Please place a checkmark within the box to indicate which method is preferred.

- □ Delivery of a document or □ Provision by electronic or magnetic record
- < If provision by electronic or magnetic record is preferred > Email address:

*Please make sure to provide an email address which is exclusively used by yourself.

As for the provision by electronic or magnetic record, a written response (including a password for the electronic or magnetic record) will be sent to the address indicated in the residency register or seal registration certificate submitted with this request form, by registered postal mail to be received only by the subject person. Later, the electronic or magnetic record will be sent to the designated email address.

Accompanying Documents

Note: In order to confirm the identity of the individual making the request, please include the following documents (both items 1) and 2) with your request.

Please place a checkmark within the box to indicate which documents are included.

- 1 One copy of your \square Driver's License or \square Passport
- ② One copy of your \square Residency Register or \square Seal Registration Certificate (Issued within the previous three months)

Processing Fee

Note: A \(\forall 800\) processing fee is charged for each information request. Please include \(\forall 800\) worth of postal stamps with your request and application documents.