REQUEST FOR DISCLOSURE OF PERSONAL INFORMATION, CORRECTIONS OR DELETIONS

					MM/DD/YYYY
Orihiro Co., L					
General Affai	irs Section				
	Name				
	Hamo				
Claimant					
	Address				
		Telephone			
(please chec	k the corresp	onding box)			
Content of Personal Information (please be as specific as possible.)					
as possible	·•/				
Personal Information Request		□disclosure	acceptable use policy	correction	
		□deletion	□other ()	
the Persona	of errors in al n Profile (※)				
			nformation, please be as spec ase submit a separate piece		ling the error contained tion does not fit in the space
【For Internal	Use] (Pl	ease do not fill ou	t the following information.)		
Proof of Ide	entity	☐Driver's Lice	ense (copy) ☐Health Card (сору)	
Documenta			form (transcript) Passpor	t (copy)	
Person in C	Charge				
Remarks					