* This letter has been sent to customers who have an account with us as of YYYY, MM, DD. If you have already closed your account, you do not need to respond to this letter.

YYYY, MM, DD Japan Post Bank, Co., Ltd.

Confirmation of Purpose of Transaction

Thank you for using Japan Post Bank and Japan Post.

In view of the increasing importance of measures against money laundering and financing of terrorism in recent years, we regularly check the purpose of transactions confirmed when opening an account according to your transaction details and activities.

Please make a response in either of the following ways. [Deadline for response: YYYY, MM, DD]

- 1. If you have a computer or smartphone
 - ⇒ Please follow the link below (Request for Presentation of Customer Information) and access "Japan Post Bank Customer Information Declaration Website." Please log in with your ID and password below and respond by the deadline.
- 2. If you do not have a computer or smartphone (or if response via a computer or smartphone is not possible)
 - ⇒ Please fill out the response sheet for "Confirmation of Purpose of Transaction" enclosed with this letter *1 and send it back in the return envelope by the deadline.

If you fail to respond by the deadline, in accordance with the bank's rules *2 we might be obliged to restrict transactions through the account.

- *1 "Notification letter (this letter)" and "How to Fill out the Form (for Individual Customers)" are available in a number of languages from the URL below.
- *2 Article 13-2, Paragraph 1, of Ordinary Deposit Regulations; Article 12-2, Paragraph 1, of Ordinary Savings Deposit Regulations, etc.
- 1. Your account number *only the last four digits are indicated ******
- 2. How to access "Japan Post Bank Customer Information Declaration Website" Please access "Request for Presentation of Customer Information" page* from the bottom part of our website and follow the link on the page.
 - * URL: https://www.jp-bank.japanpost.jp/honnin/hn_zct.html

[Password]



You can access the page by reading the QR code

Sincerely yours,

Customer Information Management Center, Japan Post Bank, Co., Ltd. Phone number: 0120 340 004

[Opening hours]

Weekdays: 8:30-21:00

Weekends and public holidays: 9:00-17:00

(excluding December 31-January 3)

Contact Us

お取引目的等の確認のお願い

- ●以下の対象口座の記号番号をご確認いただき、お取引の目的等の申告をお願いします。 ●ご申告いただいた情報は、ゆうちょ銀行のプライバシーポリシーに従って取り扱います。

(1)	※太枠内(対象口座の記号	こボールペンではっ	っきりとご記	ころくださ	い。また、□キ	や欄は、該当の	の項目に	√印をつけ	ナてくだ	さい。 ※下4桁	のみ表示	えしてい	ます。					
(2)おなまえ					++												
al N						様												
引の名差	外国籍をお持ちの	り方は、以下にご記入く	ください(特別			在留カードが多	と付されて	いない場合	は、記入さ	下要です。)			生年月	目日をご	記入くた	ごさい。 :		
(3)国籍			(4) (3	E留期間 満了日)		年		月	(7)生年,				年	J	₹	B
(5)在留資格	1 留学 2 技	能実習(号) 🔞 ਟ	の他((6)在留	カート	ド番号								
	人さまは「外はい ②いい	N国PEPs*JI			(i	国の元首及 過去に対象で ください。						ける機関	において	で重要な	地位を	占めるフ	כֿ	
Р	(9)国名	i (1	0)職位			(11)名	養人さま	まと重	要な地	位を占	ある	方との	ご関係	系			
P E P s				(1つご本人	②ご家族	英(重要な	3 は地位を占) iめる方(のお名前	:				4	続	柄:)
(12)		が当行とお取引 目的が複数ある場							己入く	ださい。	o							
	□座	(貯金・振替・	・国債)	に関連す	するお取り	31												
主なご利用目的	① 給与受取 ② 事業費決 ③ 融資 ④ 外国為替 ⑤ 生計費決 ⑥ 貯蓄/資産 ⑦ その他(取引済	その他のご利用	2 3 融資 4 外国 5 生計	為替取引 費決済 /資産運用)											[
(13)	名義人さまる	の主なご職業に	こついて、	以下の	該当する	項目にご	記入く	ださい。										
	下線のご職	業の方は、ご菫	物務先の事	事業/業	種につい	てもご記え	入くだ	さい。										
ご職業	①会社員/E ②会社役員 ③パート/ア ④個人事業	/団体役員 プルバイト/派遣	社員/契約	1社員	7 主始	務員 護士/司法記 ・主夫 職された方				示政書士							id、)
14)事業/業種	①1.農業/海 ②2.製造業 ③3.建設業 ④4.情報通 ⑤5.運輸業 ⑥6.卸売業	信業	1010.	ンサルテ 医療/福祉 改育/学習 不動産業	・ イング業 上 留支援業	1616. 1717. 1818. 1919.	中古車	収集·処 ɪ 業		2222. 2323. 2424. 2525. 2626. 2727.	外貨両 ファイフ クレジ 保険業	替業 ナンス! ットカ	ノース業 ード業	303 313 323 333 (1.弁護 2.その 3.その	受取・電話 計等事 他サー 他	話サービ: 3務 所 ·ビス業)
	77.小売業(除く貴金属/宝石)	14 14.美	美術商		21 21.	資金移	動業		28 28.	宅地建	物取引	業		択肢に当て 体的な内容		目がない場合 ください。	lq'



お取引目的等の確認のお願い

個人のお客さま

(15)	選択されたご職業につ	いて、ご勤務先、ご就学先の情報を以下にご記入ください(「主婦・主夫」、「退職された方/無職の) D方/未就学児」を選択された場合は、ご記入不要です)。
	名称/屋号		
	石柳/崖写		
	2 =	-	
<u>ٽ</u>	所在地・ 連絡先		
ご勤務先等	建裕元		
先 等		(16)業務内容	(17)上場/非上場(株式会社の場合)
	1 営業 2 一般事務	(3)総務・経理 (4)企画・管理 (5)製造・開発 (6)その他() ① 上場 ② 非上場
		(18) 役職	7 11 2 3 2 7 1 2 3
	11代表者(2)役員(3 管理職 4 一般社員 5 その他()
(10	<u> </u>	をご記入ください(個人事業主の方は年商をご記入ください)。	
収等	100万円以下 2	100万円超 3300万円超 4500万円超 5700万円超 6900	万円超 ②1,200万円超 200万円以下
(20)	予定される毎月のお	取引(預入・払戻・送金等)金額とお取引の頻度に <mark>(21)</mark> て、以下の該当する項目に	こご記入ください。
費の	1万円以下	⑤ 50万円超~100万円以下 1 週に3回以上	⑤ 2~3か月に1回
毎月のお取引金額	(2)1万円超~5万円以(3)5万円超~10万円		6半年に1回 71年に1回以下
金額	4 10万円超~50万F	円以下 (8)1,000万円超	
		お取引の資金の出所)について、以下の該当する項目にご記入ください。	
		3貯蓄 4家賃等収入 5売上金/事業収入 6資産運用益 7資産売却資金 8その	か他()
,	*	たり200万円を超える現金取引(預入・払戻)を予定されていますか。	
)はい <mark>②</mark> いいえ →「に	はい」の場合は、以下にご記入ください。	
(2	4) 現金を使う理由	資金の出所や使用用途、現金でなければならない理由についてご記入ください。	
(2	5) お取引の頻度	1週に1回以上 (2)2~3週間に1回 (3)月に1回 (4)2~3か月に1回 (5)半年に1回	
	6)1 回当たりの金額	1)200万円超~300万円以下 (2)300万円超~500万円以下 (3)500万円超~1,00	00万円以下 41,000万円超
4	•	送金を予定されていますか。	
1	/はい <mark>②</mark> いいえ → [「はい」の場合は、以下にご記入ください。	
	送金の目的 (28	送る場合 ①家族への送金 ②学費 ③海外での資産運用 ④商品購入代金	(5)その他()
	(29)受けとる場合 ①家族からの送金 ②配当金·利金等 ③商品販売代金 ④そのf	
(3		1週に1回以上 (2)2~3週間に1回 (3)月に1回 (4)2~3か月に1回 (5)半年に1回	
(3	1)1 回当たりの金額	10万円以下 (2)10万円超~100万円以下 (3)100万円超~500万円以下 (4)50	
(3	2) 取引相手国等	①中国 ③韓国 ④タイ ⑤ドイツ ⑥英国 ⑦オー⑩フィリピン ⑪香港 ⑫台湾 ⑬ベトナム ⑭イタリア ⑮インドネシア ⑯その	ーストラリア (8)フランス (9)カナダ の他()
33)本	x書に記載した情報は	事実と相違ありません。 3日中のご連絡先()-()-()
1) 1	己入日: 年	月 日 ②署名	
34) >□	回ご回答いただいた口座 下に記号番号を左詰めて	以外に同一名義でゆうちょ銀行口座をお持ちでしたら、 ご記入ください。	
1			
2			受付 日附印
3			

How to Fill Out Confirmation of Purpose of Transaction (Individual Customers)

- (1) Please confirm the last four digits of your account number.
- (2) Please provide the account holder name.
- Customers of foreign nationality ⇒ Please fill out (3)–(6).
 (Those who are a permanent special resident or a diplomat and not issued with a Residence Card can skip [3]–
 [6].)
- Other customers \Rightarrow Please proceed to (7).
- (3) Please provide your nationality.
- (4) Please provide your period of stay (the expiration date) in the order of western calendar year, month, and day.
- (5) Please indicate your Status of Residence by checking the applicable item (in the order of year, month, and day).
 - 1: Student
 - 2: Technical Intern Training ⇒ Please provide your category such as 1 号 イ, 1 号 □, 2 号 イ, or 2 号 □ in the brackets.
 - 3: Other \Rightarrow Please provide your Status of Residence in the brackets.
- (6) Please provide your Residence Card number.
- (7) Please provide your date of birth in the order of western calendar year, month, and day.
- (8) Is the account holder a foreign PEP (a person who is or was formally a foreign head of state or in an important position in a foreign government, central bank, or other equivalent institution, or a family member of such a person)? Please check the applicable item below.
 - 1: Yes \Rightarrow Please fill out (9)–(11).
 - 2: No \Rightarrow Please proceed to (12).
- (9) Please provide the country where the above person is a foreign PEP.
- (10) Please provide the position of the foreign PEP.
- (11) Please provide the relation of the account holder to the foreign PEP.
 - 1: Him/herself \Rightarrow Check here and proceed to (12).
 - 2: His/her family \Rightarrow Check here and fill out 3–4.
 - 3: The name of the person in an important position
 - 4: The relation

- (12) Please indicate the account holder's main purpose of transactions with the bank by checking the applicable item in the box on the left-hand side. If there are multiple purposes, please also check the applicable item(s) in the box on the right-hand side (multiple choices possible).
 - 1: Receipt of salary / Receipt of pension
 - 2: Settlement of business expenses
 - 3: Loan
 - 4: Foreign exchange
 - 5: Settlement of living expenses
 - 6: Savings / Asset management
 - 7: Other \Rightarrow Please provide details in the brackets.
- (13) Please indicate the main occupation of the account holder by checking the applicable item.
 - 1: Office worker / Association staff member
 - 2: Executive / Executive of association
 - 3: Part-timer / Dispatched worker / Contract worker
 - 4: Self-employed
 - 5: Civil servant
 - 6: Lawyer / Judicial scrivener / Accountant / Tax accountant / Administrative scrivener
 - 7: Housewife/Househusband
 - 8: Retired/Unemployed/Pre-school child
 - 9: Student
 - 10: Other \Rightarrow Please provide details in the brackets.
- (14) For those who chose 1: Office worker / Association staff member, 2: Executive / Executive of association, 3: Part-timer / Dispatched worker / Contract worker, or 4: Self-employed in (13), please indicate the business type by checking the applicable item(s) (multiple choices possible).

1: Agriculture/Fishery/Forestry	19: Investment
2: Manufacturing	20: Money lending
3: Construction	21: Fund transfer
4: Information and communication	22: Cryptocurrency trading
5: Transportation	23: Foreign exchange
6: Wholesale	24: Financial lease
7: Retail (excluding precious metal and	25: Credit card
jewelry)	26: Insurance
8: Restaurant/Accommodations	27: Other financial business
9: Consulting	28: Real estate agency
10: Medicine/Welfare service	29: Precious metal/jewelry trade
11: Education/Learning support	30: Postal/telephone service
12: Real estate	31: Law firm
13: Trade	32: Other service business
14: Art dealing	33: Other \Rightarrow Please provide details in the

15: Antiques trade / Pawnbroking/	brackets.
Auctioneering	
16: Used-car sale	
17: Industrial waste disposal	
18: Casino	
(15) Please provide all the following information on your	workplace or school (not applicable to those who chose
7: Housewife/Househusband or 8: Retired/Unemployed	/Pre-school child in (13)).
1: Name	
2: Postcode	
3: Phone number	
4: Address	
(16) Please indicate the type of work you are engaged in l	by checking the applicable item below.
1: Sales	
2: Clerical work	
3: General affairs / Accounting	
4: Planning/Management	
5: Manufacturing/Development	
6: Other \Rightarrow Please provide details in the brackets.	
(17) Please indicate whether your company is listed by ch	necking the applicable item below.
1: Listed	
2: Unlisted	
(18) Please indicate your position at the workplace by che	ecking the applicable item below.
1: Representative	
2: Executive	
3: Manager	
4: Staff member	
5: Other \Rightarrow Please provide details in the brackets.	
(19) Please indicate the account holder's annual income	by checking the applicable item below. If self-employed
please provide annual sales.	by enceking the approache fem below. It sen employed,
1: 1,000,000 yen or less	
2: Over 1,000,000 yen to 3,000,000 yen	
3: Over 3,000,000 yen to 5,000,000 yen	
4: Over 5,000,000 yen to 7,000,000 yen	
5: Over 7,000,000 yen to 7,000,000 yen	
6: Over 9,000,000 yen to 12,000,000 yen	

7: Over 12,000,000 yen

checking the applicable item below.
1: 10,000 yen or less
2: Over 10,000 yen to 50,000 yen
3: Over 50,000 yen to 100,000 yen
4: Over 100,000 yen to 500,000 yen
5: Over 500,000 yen to 1,000,000 yen
6: Over 1,000,000 yen to 5,000,000 yen
7: Over 5,000,000 yen to 10,000,000 yen
8: Over 10,000,000 yen
(21) Please indicate the expected frequency of transactions by checking the applicable item below.
1: Three times a week or more
2: Once a week
3: Once every two to three weeks
4: Once a month
5: Once every two to three months
6: Once every half-year
7: Once a year or fewer
(22) Please indicate the main fund for transactions (where the money for transactions comes from) by checking
the applicable item below.
1: Salary
2: Pension
3: Savings
4: Rental income
5: Sales amount / Business revenue
6: Asset gain
7: Asset sales gain
8: Other \Rightarrow Please provide details in the brackets.
(23) Are you planning a cash transaction (deposit or withdrawal) of over 2,000,000 yen? Please check the
applicable item below.
1: Yes \Rightarrow Please fill out (24)–(26).
2: No \Rightarrow Please proceed to (27).
(24) Please give reasons for making the transaction in cash.
(25) Please indicate the frequency of cash transactions of over 2,000,000 yen by checking the applicable item below.
1: Once a week or more

(20) Please indicate the expected amount of monthly transactions (deposits, withdrawals, remittances, etc.) by

5: Once every half-year
6: Once a year or fewer
(26) Please indicate the amount of a cash transaction of over 2,000,000 yen by checking the applicable item
below.
1: Over 2,000,000 yen to 3,000,000 yen
2: Over 3,000,000 yen to 5,000,000 yen
3: Over 5,000,000 yen to 10,000,000 yen
4: Over 10,000,000 yen
(27) Are you planning overseas remittances? Please check the applicable item below.
1: Yes \Rightarrow Please fill out (28)–(32).
2: No \Rightarrow Please proceed to (33).
(28) Please indicate the purpose(s) for overseas remittances by checking the applicable item below (when you are
an applicant) (multiple choices possible).
1: Remittance to family
2: Tuition fee
3: Overseas asset management
4: Purchase price of goods
5: Other ⇒ Please provide details in the brackets.
(29) Please indicate the purpose(s) for overseas remittances by checking the applicable item below (when you are
a payee) (multiple choices possible).
1: Remittance from family
2: Dividend/Interest
3: Sales proceeds of goods
4: Other ⇒ Please provide details in the brackets.
(30) Please indicate the frequency of overseas remittances by checking the applicable item below.
1: Once a week or more
2: Once every two to three weeks
3: Once a month
4: Once every two to three months
5: Once every half-year
6: Once a year or fewer
•

2: Once every two to three weeks

4: Once every two to three months

3: Once a month

(31) Please indicate the amount of an overseas remittance by checking the applicable item below.

1: 100,000 yen or less

2: Over 100,000 yen to 1,000,000 yen
3: Over 1,000,000 yen to 5,000,000 yen
4: Over 5,000,000 yen
2) Please indicate the remittance destinat
multiple choices possible).
1. United States

(32) Please in	dicate the	remittance	destination	countries	or	regions	by	checking	the	applicable	item(s)	below
(multiple cho	oices possi	ble).										

(32) Please indicate the remittance destination countries or regions by checking the applicable item(s) below
(multiple choices possible).
1: United States
2: China
3: Republic of Korea
4: Thailand
5: Germany
6: U.K.
7: Australia
8: France
9: Canada
10: Philippines
11: Hong Kong
12: Taiwan
13: Vietnam
14: Italy
15: Indonesia
16: Other \Rightarrow Please provide details in the brackets.
(33) Please confirm that the information given is correct and provide the following details.
1: Date
2: Signature
3: Phone number

(34) If you have other accounts at Japan Post Bank under the same name, please provide the account number(s).