

5 **Side A** For [3], if you wish the payment to be deposited into your agent's financial institution account

Please fill in the pink fields and attach the required documents.

- Please place your signature below. The spouse, parent, or child of the head of the household are also considered to be agents. If agent's relationship to the head of the household is "Other," please enter the relationship inside the parentheses.

Signature of head of household	I hereby authorize the person listed below to act as my agent and to confirm and receive the Temporary Special Benefit on my behalf.		Name of head of household	
Signature of agent	Name (title) of agent	Agent address (location)	¥ — Daytime contact: () —	
		Relationship to head of household	Same household	Other (Relationship:)

Those who can confirm/receive on behalf of the eligible person	Relationship to head of household	
	Same household	Other
	• A person listed on the same resident record as the head of the household	• Relatives or other people who regularly take care of the eligible person

Example of how to fill out the form if you wish the deposit to be made to your agent's financial institution account

5 **Side A** For [3], if you wish the payment to be deposited into your agent's financial institution account

Please fill in the pink fields and attach the required documents.

- Please place your signature below. The spouse, parent, or child of the head of the household are also considered to be agents. If agent's relationship to the head of the household is "Other," please enter the relationship inside the parentheses.

Signature of head of household	I hereby authorize the person listed below to act as my agent and to confirm and receive the Temporary Special Benefit on my behalf.		Name of head of household	Yokkaichi Taro
Signature of agent	Name (title) of agent	Agent address (location)	XXXXXX, Yokkaichi City	
		Relationship to head of household	Same household	Other (Relationship:)

¥ 510 — XXXX Daytime contact: (059) 345 — XXXX

Please fill out the form clearly and accurately using a **black ballpoint pen**. Do not use an erasable pen or pencil.

Regarding the photocopy of the identity verification document

*For any one of the following documents that is still valid, the part with the name and date of birth and the part with any changes


- Driver's license
 - Health insurance card (Eligibility confirmation certificate)
 - Passport
 - Residence card (front and back)
 - Special permanent resident certificate (front and back)
 - Physical disability certificate
 - Medical rehabilitation handbook
 - Certificate of insured person for long-term care insurance, etc.
 - National pension handbook, etc.
 - Basic resident registration card (with photo)
 - My Number Card (photo side only)
- *My Number Notification Card (without photo) cannot be used.

Copy of account information *Please also see the attached flyer.

- **In the case of Japan Post Bank**
Please submit a copy of a document that shows the "code," "number," and "account holder name."
 - **In the case of banks other than Japan Post Bank** (a photocopy of one of the following)
"Copy of the bankbook (front and back)" "For accounts without a bankbook, a copy of the ATM card (front and back), an image of the electronic bankbook, etc."
*Please avoid using credit cards or debit cards that are linked to the account, as the name on the card may differ from the account holder or the name of the financial institution may be unknown.
- If after receiving the benefit, you are found to be ineligible through an amended municipal tax return or other means, or if you received the benefit through false pretenses or other fraudulent means, you may be required to return the benefit.

Website for application status inquiries

- Enter the confirmation form number on the above website to check the application status. (Also available to those who applied by mail.)



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