

To: Cocone Corporation, Personal Information Disclosure Request Support Desk

Disclosure Request for Personal Data Record(s) Shared with Third Parties

Pursuant to Article 33, Item 5 of the Act on the Protection of Personal Information, I request the disclosure of records created in relation to the provision of personal data to third parties (referred to below as "Record(s) Shared with Third Parties").

1. Requester Information

Request date: _____ (YYYY/MM/DD)

Requesting Party	*Please check (✓) the applicable boxes.	
	<input type="checkbox"/> Self <input type="checkbox"/> Representative	
Individual's name, address, date of birth, phone number, email address	Name	Seal
	D.O.B.	
	Address	Postal Code
	Phone ()	
	Email @	
Representative's name, address, date of birth, phone number, email address (Only fill in this section if a representative is making the request)	Name	Seal
	D.O.B.	
	Address	Postal Code
	Phone ()	
	Email @	

2. Identity Verification Method (Please check (✓) the box of your selected method of verification)

(1) Identity verification document of the requester or representative (A copy of one of the following)

- Driver's License Health Insurance Card Passport My Number Card
- Basic Resident Registration Card Alien Registration Certificate (Residence Card, Special Permanent Resident Certificate)

(2) Power of attorney confirmation document (Only fill in this section if a representative is making the request)

A. Legal representatives (A copy of one of the following)

- Family Register Abstract of Family Register Certificate of Registered Information for Adults Under Guardianship Other ()

B. Voluntary representatives (Both of the following)

- Letter of attorney (Affixed with the authorizing person's signature and seal)
- The authorizing person's seal affixed to the letter of attorney, along with a registration certificate containing the seal's imprint

C. Attorneys, judicial scriveners, administrative scriveners, or others qualified to serve as a representative

- Document(s) verifying such qualification (Registration number, seal registration certificate of an official seal)

3. Record(s) Shared with Third Parties requested for disclosure

Please check (✓) the box for the type of record you are submitting.

Record(s) Shared with Third Parties during a time when our company provided personal data to a third party

Record(s) of Third Party Provision during a time when our company received personal data from a third party

(Items related to the specification of Record(s) of Third Party Provision to be disclosed)

*Specify the content, period, etc. of Record(s) Shared with Third Parties being requested for disclosure in as much detail as possible.

