

Power of Attorney

MM / DD / YYYY

Name: _____ (seal)

* Please use the same personal seal in your seal certificate.

Address: _____

I appoint the following person as my representative and grant to my representative the below-specified powers.

Name of representative: _____ (seal)

Address of representative: _____

Tel: _____

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Entrusted Powers: * Please place a checkmark in the below-listed powers entrusted to your representative.

- ☐ All actions regarding requests to NOE CORPORATION for notification about the purposes of use regarding my personal information (personal data) in the Company's possession pursuant to Article 27, Paragraph 2 of the Act on the Protection of Personal Information;
- ☐ All actions regarding requests to NOE CORPORATION for disclosure of my personal information (personal data) in the Company's possession pursuant to Article 28, Paragraph 1 of the Act on the Protection of Personal Information;
- ☐ All actions regarding requests to NOE CORPORATION to correct, add to, or delete my personal information (personal data) in the Company's possession pursuant to Article 29, Paragraph 1 of the Act on the Protection of Personal Information; or
- ☐ All actions regarding requests to NOE CORPORATION to suspend use of or delete my personal information (personal data) in the Company's possession pursuant to Article 30, Paragraph 1 of the Act on the Protection of Personal Information.