Please return the enclosed return envelope only in cases where there are any changes in the account details indicated in the "Notice of Payment of Adjustment Benefits (shortfall benefits) for FY2025" or you would like to decline receiving the benefits.

[Response deadline] August 12, 2025 (Tuesday) (we must receive the form)

Notification of Change of Transfer Bank Account or Cancellation of Benefits

To:	Mayor	of A	nin	City

I am submitting the transfer bank account details for the 2025 adjustment benefits (shortfall benefits).

Confirmation date	2025	MM	DD

Applicant *Be sure to fill out the details

Name	Date of birth			Address			
(Furigana)	Taisho Showa		₸				
(Signature)	Heisei Reiwa						
	YYYY	MM	DD	Telephone Number	()

\bigcirc	Please	check	刁	the	corres	ponding	box
\sim			_				

Bank account change

		l want	to	change	my	bank	account
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Transfer bank account details after the change (only for beneficiary accounts)

Account name (Kana)	Please enter your name in Kana									
	Name of the Financial institution						Bran	nch Name		Deposit Typ
Bank		□Bank □Agricultura		kin Bank lit Union				☐ Head Office	Branch tion □ Satellite Office	☐ Ordinary account
	Financial Institution No.			1	number ch No.)			Account Number	— Onice	
Japan	Bank	book syn	nbol							
Post Bank	1			0	_					

^{*}Do not enter details of a dormant account, or an account without any transactions

2 Required Documents (Please attach the following documents on the right side.)

Copy of applicant identity verification document

My Number Card (front side only), health insurance card, driver's license, pension book, nursing care insurance card, passport, etc. *In the case of a proxy application, please attach the identification documents of both the proxy and the applicant.

Copy of document that confirms bank account

Documents such as a copy of passbook's two pages that can confirm the name of the financial institution, branch name, deposit type, account number, and account name (in kana) of the transfer account

*Please note that we cannot return the copy of the bank account change notification and documents you submit.

3 Application by proxy Please fill in the table below if your proxy (alternate beneficiary) is going to receive this stipend.

ary	Alternate beneficiary's name	Relationship with Applicant	Proxy Date of Birth		Alternate beneficiary's address
beneficiary	(Furigana)	_	Taishō Shōwa Heisei YYYY MM DD	Telephone Nu	imbor ()
l e			TITI WIWI DD	relephone No	illibei ()
Alternate k	I acknowledge that the about authorize him/her to receiv			Applicant name	Name and seal or signature of the applicant
₹	Reason for delegation				

Decline

I decline to receive this Stipend -> Form filling is complete. Please respond before the deadline.

Documents to be attached

*For persons who wish to "change their bank account" or "apply for a proxy," the following documents are required.

Please paste a copy of the "Attachment" here.



Paste/attach a copy of Identity verification document(s)







Please copy the part Etc. where your name and current address are

Driver's license (copy) My Number card (copy) Residence card (copy)

- *A copy of the reverse side of the card should also be attached if it contains information about a name change, address change, etc.
- *In case of a proxy application, please attach the identification documents of the proxy as well.

Please paste a copy of the "Attachment" here.



Column to paste/attach the proof of account (copy)

*Please copy the part where the financial institution name, branch name, account number, and account name (on the back of the passbook cover) are listed.

*For people who use a "paper-less account" or net banking, where a passbook has not been issued, attach a print-out of your account page that lists the financial institution name, branch name, account number, and account name.



Passbook copy



- 「定額減税しきれない方へ 調整給付金(不足額給付)」に関するお知らせを翻訳したものは、左記QRコードよりご確認ください。
- · Please use the QR code on the left to access the translated notice regarding the "Adjustment Benefits (shortfall benefit amount) for those who are unable to receive fixed-amount tax reduction". ·请扫描左侧的二维码查看关于"面向定额减税未足额减免人群的调整补助金(不足额部分补助)"的通知的翻译文件。
- · Suriin mula sa QR code sa kaliwa upang tingnan ang isang isinaling bersyon ng paunawa patungkol sa "Adjustment Benefit (Mga Kakulangan sa Pagbabayad) para sa hindi makakabawas sa fixed-amount tax reduction."
- · Vui lòng quét mã QR ở bên trái để xem bản dịch của thông báo liên quan đến "Tiền trợ cấp điều chình (trợ cấp phần còn thiếu) dành cho những người chưa được giảm đủ thuế theo mức cố định". · Veja o código QR à esquerda para obter a versão traduzida do aviso sobre "Benefício de ajuste (Pagamento do valor faltante)" voltado aos que não puderam receber a redução fixa do imposto.

※QRコードは㈱デンソーウェーブの登録商標です。