Attachment 2

Date of application for registration:

To: Financial Services Agency

**Confirmation of the ARFP Registration**

**(Documentation Certifying Fulfillment of ARFP Registration Requirements)**

Applicant for registration for the Asia Region Funds Passport

Postal code:

Address:

Telephone:

Name of corporate:

Title and name of representative: 　　　　　　　(Seal)

In submitting our application for registration for the Asia Region Funds Passport, we hereby confirm that our company shall be compliant with the provisions set out in the “Memorandum of Co-operation on the Establishment and Implementation of the Asia Region Funds Passport,” and with the regulations set forth by the host country that is our export destination.

Asia Region Funds Passport Receipt Number

ＸＸＸＸＸＸＸＸＸＸＸＸＸ

Name of fund:

Date of registration: