JapanNet

KDDI America, Inc.

Modification Form

[Current Information]

Customer Name — Last Name | First Name

Customer Code — 1 4 - _ _ _ _ _ _ _

Social Security Number — _ _ _ - _ _ - _ _ _ _

[Modification]

Please fill in the field(s) which you need to modify (The name of subscriber must be the same as the credit card holder).

Customer Name — Last Name | First Name

Address — Street

City | States | Zip Code

Phone Number — _ _ _ - _ _ _ - _ _ _ _

FAX Number — _ _ _ - _ _ _ - _ _ _ _

Payment — Type of Credit Card: ☐ VISA ☐ Master ☐ JCB ☐ AMEX

Credit Card Number: _ _ _ _ - _ _ _ _ - _ _ _ _ - _ _ _ _

Expire Date (mm/yy): _ _ / _ _

Signature _____ Date DD / MM

< KDDI MEMO>

Note

Agency No. Code1 Code2 Code3

One Time Charge | Monthly Charge | Service Start Date

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