Form 9 (Pertaining to 13.)

Date:

To: The Governor of Tokyo

|  |  |
| --- | --- |
| Address: |  |
| Name of Company/Branch Office: |  |
| Representative/Representative in Japan: |  |

**Request for Payment**

|  |  |
| --- | --- |
| Subject | The Business Establishment Subsidy Program |
| Amount |  |  |  |  |  |  |  |  | yen |

　　　We hereby submit the above request in accordance with the Notification on Determination to Grant Amount of the Business Establishment Subsidy Program by (No.) on (Date) .

End