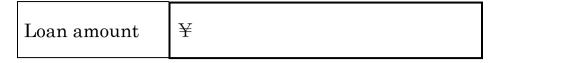
## $\frac{ \ \ \, \text{Emergency Special Case Small Loan} }{ \ \ \, \text{Promissory Note} }$



I have borrowed the above amount as an emergency-use special case small loan. Accordingly, I promise to strictly adhere to the loan terms and conditions as detailed in the Emergency Special Case Small Loan Application Form.

令和 年 月 日 ※都道府県社協記入欄

2) SAMPLE

## Social Welfare Corporation: President of the Aichi Prefecture Council of Social Welfare

(Borrower)

| Address                   |                     |
|---------------------------|---------------------|
| Full name                 | <del>们(stamp)</del> |
| Date of<br>birth<br>Y/M/D |                     |

## [Borrowing requirements]

| 1. Method of<br>receiving loan | Direct transfer to the account of a financial institution specified by the borrower.  |  |  |  |  |  |
|--------------------------------|---|--|--|--|--|--|
|                                | Deferment<br>period   | until the end of Dec,2023                                      |  |  |  |  |
| 2. Repayment of loan           | Repayment period  | months (maximum of 24 months)                                  |  |  |  |  |
|                                | Repayment<br>method   | <ul> <li>Monthly payments</li> <li>Lump sum payment</li> </ul> |  |  |  |  |
| 3. Overdue<br>interest         | If the loan amount is not repaid by the last day of the repayment period,<br>an overdue interest rate of 3.0% per annum will be collected on the<br>remaining principal balance after the repayment period. |  |  |  |  |  |

## [Notes]

The applicant must fill in the bold framed fields above.

The deferment period begins from the month following the month of the remittance date. The repayment period will begin from the month following the end of the deferment period. Early redemption will be made to the account of a financial institution designated by each prefecture's respective social welfare council.

| Local Ward | Year | Funds | Loan Code | Branch/Receipt No.                        |  |
|------------|------|-------|-----------|---|--|
|            |      |       |           | Municipality Council<br>of Social Welfare |  |

\* Foreign residents who do not have a name stamp (inkan) may write their signature where name stamps are required.