

Date: 05/26/2015

Letter of Authorization

To: TÜV Rheinland LGA Products GmbH or TÜV Rheinland Group

Applicant	Company name:	OMRON HEALTHCARE Co., Ltd.
	Address:	53, Kunotsubo, Terado-cho, Muko, KYOTO, 617-0002 JAPAN
	Department & Title:	CUSTOMER SATISFACTION MANAGEMENT HQ ASSISTANT MANAGER
	Name of Responsible person:	Toshiaki Yuasa
	TEL:	+81-75-925-2045
	FAX:	+81-75-925-2046

Toshiaki Yuasa
Signature or seal...

I appointed the individual specified below as the applicant's agent and authorize her/him to perform the acts set forth below. I grant her/him complete authority and entrust her/him complete responsibility for the performance of these acts.

Deputy	Company name:	KRELL PRECISION (YANG ZHOU) CO.,LTD
	Address:	NO.28,XING YANG ROAD,ECONOMIC DEVELOPMENT ZONE,YANGZHOU,JIANGSU,CHINA
	Department & Title:	Manager QA
	Name of Responsible person:	Yongmei hu
	TEL:	+86-514-87961819
	FAX:	+86-514-87961918

Signature or seal...

1. Details of entrustment
 - FCC/IC application

2. Period of entrustment
 - ☒ Until the entrusted business is finished.
 - ☐ Set the period from.....until

Note: The period set shall be within one(1) year.

For every application during the period set, please provide a copy of this Letter of Authorization.