

**APPLICATION FOR COLLECTION / NEGOTIATION**

**International Operations Department, S.W.I.F.T.: CCEBUS6LXXX**

Los Angeles Office

2222 W. Olympic Blvd., 2nd Floor  
Los Angeles, CA 90006  
Tel: 213-637-9568, 9572, 9569 Fax: 213-386-3289

Chicago Office

5520 N. Lincoln Ave.  
Chicago, IL 60625  
Tel: 773-733-3000, 3013, 3014 Fax: 773-433-3001

Seattle Office

17410 Highway 99, Suite 120  
Lynnwood, WA 98037  
Tel: 425-743-7777, 7689, 8761 Fax: 425-741-3215

Date  Advice Number  AU  
L/C Number  Draft Amount  \$

Gentlemen,

We enclose  for negotiation  for reimbursement collection  for collection to issuing bank  
 for Documentary Collection to collection bank

Bank Name   
Address and Country   
S.W.I.F.T. Code

of the draft (bill of exchange) under the subject references on letter of credit or documentary collection.

After deducting all your charges, expenses, and commissions, please pay as follows:

Credit our account with your bank   
 Issue cashier's check   
 Wire transfer to our account with

We understand and agree that in receiving the above items for letter of credit collection or negotiation or documentary collection you act only as our collection agent and assume no responsibility beyond the exercise of due care.

You will not be liable for default or negligence of your correspondents nor for losses in transit, and each such correspondent shall not be liable except for its own negligence.

**GUARANTY OF REPAYMENT**

**In the event the draft (bill of exchange) your Bank has purchased from us is not accepted, honored, or paid pursuant to its terms by reason of any of the discrepancies or deficiencies, we will pay you back, upon your Bank's demand, the amount your Bank has paid us for such draft (bill of exchange), in the same currency, together with an additional sum covering all interest, expenses and charges payable to your Bank.**

OTHER INSTRUCTIONS (If any) :

Beneficiary / Customer  
   
Authorized Signature  
   
Name and Title