



BANK APPLICATION FORM

Please fill out this form completely and submit it with the following documents:

- | | |
|---|--|
| <input type="checkbox"/> Non-Disclosure Agreement signed by the authorized representative <input type="checkbox"/> Implementing Agreement signed by the authorized representative <input type="checkbox"/> Bank certificate, photocopy of passbook or bank statement (Settlement Bank) <input type="checkbox"/> Batch Registration Form <input type="checkbox"/> SEC Registration and Articles of Incorporation | <input type="checkbox"/> Original Notarized Corporate Secretary's Certificate indicating authorized representative <input type="checkbox"/> Income Tax Return with Audited Financial Statement <input type="checkbox"/> CMA Form (for those using BPI as their settlement bank) <input type="checkbox"/> AutoloadMax Survey |
|---|--|

| COMPANY INFORMATION | | | |
|---|-------------------|---|---|
| Name of Bank | | Tel No. with area code | Fax No. with area code |
| Address | | Wallet Threshold <small>(G-Cash wallet balance to retain after settlement)</small> | Latest Ranking of Company <input type="checkbox"/> Top 2,500 <input type="checkbox"/> Top 5,000 <input type="checkbox"/> Beyond 5,000 |
| Trade Name (if different from Company Name) | Number of Outlets | Type of Products Services | Corporate Tax ID No. |

| E-MAIL ADDRESS INFORMATION | | |
|---|------------------------------------|----------------|
| <i>This is the official e-mail address that receives the daily transaction (of head office and branches wallets) report from Globe/GXI.</i> | | |
| Authorized Person | Email Address of Authorized Person | Contact Number |

| CONTACT INFORMATION | | | |
|---|-----------------|---------------------------------|-----------------------|
| <i>(Use another sheet if necessary)</i> | | | |
| | <i>Position</i> | <i>Contact No. / Mobile No.</i> | <i>E-mail Address</i> |
| Authorized Representative | | | |
| Over-all Contact Person(s) | | | |
| Technical Contact Person(s) | | | |
| Customer Service/Operations Contact Person(s) | | | |
| Finance Contact Person(s) | | | |

| SETTLEMENT BANK | | | | | |
|---|----------------|--------------|----------------|--------------|--|
| <i>(For Text-a-Payment and G-Cash Services)</i> | | | | | |
| NAME OF BANK <small>(Please select from Attached List of Available Settlement Banks)</small> | BRANCH/ADDRESS | ACCOUNT NAME | ACCOUNT NUMBER | ACCOUNT TYPE | FREQUENCY OF SETTLEMENT |
| | | | | | <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> By Request |

| TO BE FILLED UP BY A REPRESENTATIVE OF G-XCHANGE, INC. | | | | | |
|--|--|---|--|--|--|
| Type of Interface <input type="checkbox"/> P2P <input type="checkbox"/> API / SOAP <input type="checkbox"/> Others _____ | | Services Offered <input type="checkbox"/> Sell <input type="checkbox"/> Cash In <input type="checkbox"/> Batch Upload Service (BUS) <input type="checkbox"/> Cash Out <input type="checkbox"/> Donate <input type="checkbox"/> Both: _____ | | | |
| If existing subscriber <input type="checkbox"/> New Line <input type="checkbox"/> Existing Line Indicate Mobile No. _____ | | If G-Cash Subscriber <input type="checkbox"/> New Account <input type="checkbox"/> Existing Account Indicate Mobile No. _____ | | Target Start Date _____ | |
| Main Wallet Limit | | Outlet Wallet Limit | | Rate Structure <input type="checkbox"/> % of Gross Sales <input type="checkbox"/> MSF <input type="checkbox"/> Others _____ | |
| <i>I have checked and verified the supporting credit requirements against the original documents and found them to be authentic and in accordance with G-Xchange, Inc. requirements.</i> | | | | | |
| <i>Approved By</i> <div style="text-align: right;">Date</div> | | <i>Registered By</i> <div style="text-align: right;">Date</div> | | Business Unit _____ Code _____ MSA No. _____ DR No. _____ Batch Reg. Form No. _____ | |

| PARTNER DECLARATION | | |
|--|------------------------|------|
| <p><i>I hereby confirm that the above information is true and correct and I have read the Terms and Conditions stated in the implementing agreement, which terms and conditions I agree to abide by affixing my signature hereunder. I hereby authorize G-Xchange, Inc. to modify the details of my G-Cash account, if necessary to enable my accreditation as a partner. I undertake to inform G-Xchange, Inc. of any changes in the above information. I understand that the default wallet limits are PHP200,000 for each branch and PHP1,000,000 for head office unless requested to be changed by the bank through a written request.</i></p> | | |
| NAME & SIGNATURE | POSITION / DESIGNATION | DATE |