



# CLAIM FORM

## WUSATA® FUNDMATCH PROGRAM

For Internal Use Only	
WUSATA Claim #	
ICP Claim #	
ICP on file	<input type="checkbox"/>
Oversized items	<input type="checkbox"/>

FundMatch Participant Pearl's Jam

Country Where Activities Occurred (Complete a separate claim form for each country) Ireland

Brands & Products Pearl's Jam - Jam

FundMatch Program Activity Code S2018 Program Approval Date 1-1-18

Claim Reference Number (optional) In Store Display

Expenditures by U.S. Company:	
Total Expenditures:	\$ 900
Reimbursement Due (50%):	\$ 450

or

Expenditures by In-Country Partner / Distributor:	
Total Expenditures:	\$
Reimbursement Due (50%):	\$

Note: An In-Country Partner Agreement must be on file with WUSATA® for these expenditures to be eligible.

Foreign Third Party: \_\_\_\_\_

Check here if the In-Country Partner would prefer to be reimbursed directly via wire transfer. Please provide a completed Wire Transfer Form with the claim.

### CERTIFICATION STATEMENT:

WARNING: Federal and State law provide severe penalties for making false or misleading statements or representations of fact with respect to this claim. Under penalties of perjury, I declare and certify that I have personally examined this claim for reimbursement and the accompanying schedules, statements, and other documents; that I have conducted a reasonable investigation into the facts represented therein and to the best of my knowledge and belief, they are complete, true, correct, and accurate, and they truly, accurately, and completely list all information and amounts and sources related thereto; that the expenditures claimed on this form were in fact incurred by the Company for the purpose indicated herein, and the activities portrayed and described in the accompanying information in fact took place exactly as described and/or represented herein; that such expenses were for the promotion of the products and brands in the country market all as listed above; that the participant has not been reimbursed for the expenses claimed by any other entity; and that the expenses claimed are necessary and reasonable for the purpose, and verifiable and supported by detailed records which are available for inspection.

Signature: <u>Pearl Johnson</u>	Date: <u>October 16, 2018</u>
Print Name: <u>Pearl Johnson</u>	Title: <u>Owner</u>
Phone: <u>123-456-7890</u>	Email: <u>pearl@pearlsjam.com</u>

Claim Contact\*: \_\_\_\_\_ Email: \_\_\_\_\_

\* Please include an approved claim contact if different than the company signer



# Invoice

**ABC Grocery**

Date: 10/1/2018

Invoice #: 1001

Bill to: **Pearl's Jam**

[Street Address]

[City, ST ZIP Code]

[Phone]

Months	Description	Unit Price	Line Total
3	In Store Display - Seasonal Rental	\$ 300	\$ 900
	<b>1 location, Ireland Fancy Food Market</b> <b>3 months: October-December</b> <b>Holiday Season Campaign</b> <b>Pearl's Jam Strawberry</b>		
		Subtotal	\$ 900
		Sales Tax	
		<b>Total</b>	<b>\$ 900</b>

WUSATA SAMPLE ONLY

# Wire Transfer Request



## Payment Information

Fed Ref # XXXXXXXXXXXXXXXX

## Debit Account

Debit Account

**Pearl's Jam**

Acct # xxxxx1234

## Beneficiary

Beneficiary

**ABC Grocery**

Acct # xxxxx9876

Beneficiary Bank

**FundMatch Bank**

IRC xxxxx5678

## Payment Details

Debit Currency USD – United States Dollar

Credit Currency USD – United States Dollar

Amount **900.00 USD**

Value Date **10/01/2018**

Cutoff time 05:30 pm ET

## References

Originator to Beneficiary Information

Purpose of Payment PAYMENT ACCORDING TO  
CONTRACT

Originator

Pearl's Jam  
ADDRESS  
CITY, STATE, ZIP

# Checking Account

ACCOUNT #: xxxxx1234 | October 1, 2018 – October 31, 2018 | Page 1 of 3

**BANK  
LOGO**

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## Pearl's Jam

ADDRESS

CITY, STATE, ZIP

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## Account Summary

### Credits

#### Electronic deposits/bank credits

Date	Amount	Description
10/5	578.03	In wire; ref. 12345645654xxxxx
10/15	2,111.29	Daily deposits
10/30	7,133.82	Daily deposits

### Debits

#### Checks paid

Date	Amount	Check Number
10/2	100.00	1234
10/10	350.00	1235
10/10	3,841.96	1236
10/17	121.07	1237
10/22	1,250.00	1238

#### Electronic withdrawals/bank debits

Date	Amount	Description
10/01	900.00	Wire transfer to ABC Grocery; ref. 1234567599xxxx
10/11	2,000.00	Withdrawal
10/28	948.31	Wire transfer to Bank; ref. 1234567637xxxx





