CONFIDENTIAL



CLAIM FORMWUSATA® FUNDMATCH PROGRAM

| For Internal Use Only | |
|-----------------------|--|
| WUSATA Claim # | |
| ICP Claim # | |
| ICP on file | |
| Oversized items | |

| FundMatch Participant | | Pearl's Jam | L | |
|--|--|---|--|--|
| Country Where Activities Occurred (Complete a separate claim form for each country) | | Ireland | | |
| Brands & Products | Pearl's Jam - Jan | n | | |
| FundMatch Program Activ | S2018 | | rogram Approval ate <u>1-1-18</u> | |
| Claim Reference Number | (optional) | In Store Display | | |
| Expenditures by U.S. Co | mpany: | | | |
| Total Expenditures: | \$ 900 | | | |
| Reimbursement Due (50%): | \$ 450 | | V | |
| | or | | | |
| Expenditures by In-Cour | ntry Partner | / Distributor: | | |
| Total Expenditures: | \$ | | | |
| Reimbursement Due (50%): | \$ | | | |
| Note: An In-Country Partner Agre | eement must be | on file with WUSATA® for | or these ex | xpenditures to be eligible. |
| Foreign Third Party: | | | | |
| | | would prefer to be rein ansfer Form with the cla | | directly via wire transfer. |
| Under penalties of perjury, I declar statements, and other documents; the and belief, they are complete, true, or thereto; that the expenditures claime and described in the accompanying promotion of the products and brand | ovide severe pena e and certify that lat I have conduct orrect, and accura d on this form we information in fact is in the country m | I have personally examine ed a reasonable investigation te, and they truly, accurately tre in fact incurred by the Coct took place exactly as desharket all as listed above; that | d this claim in into the fa and compl mpany for the cribed and/ at the partic | ements or representations of fact with respect to this claim. In for reimbursement and the accompanying schedules, acts represented therein and to the best of my knowledge eletely list all information and amounts and sources related the purpose indicated herein, and the activities portrayed for represented herein; that such expenses were for the cipant has not been reimbursed for the expenses claimed se, and verifiable and supported by detailed records which |
| Signature: Pearl Johns | son | | Date: | October 16, 2018 |
| Print Name: Pearl Johns | son | | Title: | Owner |
| Phone: 123-456-789 | 0 | | Email: p | pearl@pearlsjam.com |
| Claim Contact*: | | | Email· | |

^{*} Please include an approved claim contact if different than the company signer

EXPENSE SUMMARY SHEET

You may substitute your own summary sheet or attach additional pages if necessary

| Country: Reference Number | Date of Activity | Description* | Foreign Currency Amount | Exchange Rate ** | U.S. \$ Amount (REQUIRED) |
|---------------------------|---------------------------|------------------|-------------------------------|---------------------|------------------------------|
| | | | | | |
| | October- December 2018 | In Store Display | | | \$ 900 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | C/V, | | | |
| | | | | | |
| | | | | | |
| | | | | TOTAL: | \$ 900 |
| | | | | 50%: | \$ 4 50 |

^{*} Using the Travel Expense Summary, list international travel expenses for trade shows as one line item per traveler. Do not list the airfare, hotel, and meals as separate items.

CLAIM REIMBURSEMENT CHECKLIST

| If activity was completed more than 90 days ago, 👽, claim is NOT ELIGIBLE. Do not submit expenses. |
|--|
| All activities are dated after your Approval Date and occur in the current program year. |
| Each expense listed above includes the vendor invoice, proof of payment, and proof of activity. |
| All created materials and advertising clearly identify the products as from the U.S.A. Examples: "Product of the U.S.A." or "Grown in Washington" (state name cannot be abbreviated) |
| The expenses itemized above are for an approved country market and for the brands and products listed in the FundMatch Program Agreement. |
| Refer to the FundMatch Program Manual for the documentation required for each type of expense. |

Mail completed claims to: WUSATA FundMatch Program 4601 NE 77th Avenue, Suite 240

Vancouver, WA 98662

^{**} Exchange Rates can be found at: www.oanda.com. Use the date of payment for figuring the U.S. dollar amount.

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 |
| | 1 location, Ireland Fancy Food Market 3 months: October-December | | | | |
| | Holiday Season Campaign | | | | |
| | Pearl's Jam Strawberry | | | | |
| | | | | | |
| | | VX | Subtotal | \$ | 900 |
| | | S | Sales Tax | | |
| | 2 | | Total | \$ | 900 |

Wire Transfer Request

BANK LOGO

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



Pearl's Jam

ADDRESS CITY, STATE, ZIP

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 |
|------------------------|---------------------|---|
| <mark>10/01</mark> | <mark>900.00</mark> | Wire transfer to ABC Grocery; ref. 1234567599xxxx |
| 10/11 | 2,000.00 | Withdrawal |
| 10/28 | 948.31 | Wire transfer to Bank; ref. 1234567637xxxx |

WUSATA SAMPLE ONLY
October



WUSATA SAMPLE ONLY

November



WUSATA SAMPLE ONLY

December

