## CONFIDENTIAL

		AIM FORM	RAM	For Internal Use Only   WUSATA Claim #   ICP Claim #   ICP on file   Oversized items
FundMatch Participant		Pearl's Jam		
Country Where Activities Occurred (Complete a separate claim form for each country)		Austría		
Brands & Products		Pearl's Jam - Jam		
FundMatch Program Activity Code		S2018	Program _Date	Approval <u>1-1-18</u>
Claim Reference Number (optional)		Samples Shipping	_ 🔇	
Expenditures by U.S. Co	mpany:		$\mathbf{X}$	
Total Expenditures:	\$ 255			
Reimbursement Due (50%):	\$ 127.50		$\checkmark$	
	or			
Expenditures by In-Cour	ntry Partner	/ Distributor:		
Total Expenditures:	\$			
Reimbursement Due (50%):				
Note: An In-Country Partner Agr	eement must be	e on file with WUSATA® for the	ese expenditur	es 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 are necessary and reasonable for the purpose, and verifiable and supported by detailed records which are available for inspection.

Signature: <i>Pearl Johnson</i>	Date: September 1, 2018
Print Name: Pearl Johnson	Title: Owner
Phone: 123-456-7890	Email: 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)
	8-6-2018	Shipping Samples to a Distributor			\$ 255
				TOTAL:	\$ 255
				50%:	\$ 127.50

\* 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.

\*\* Exchange Rates can be found at: <u>www.oanda.com</u>. Use the date of payment for figuring the U.S. dollar amount.

#### 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 <u>FundMatch Program Manual</u> for the documentation required for each type of expense.
- Mail completed claims to: WUSATA FundMatch Program

4601 NE 77<sup>th</sup> Avenue, Suite 240 Vancouver, WA 98662

# **Global Shipping**

Invoice

[Street Addres [City, ST ZIP Co [Phone]		Do Invoice	ate 8/6/2018 e # 672018
Bill To:	Pearl's JamSt[Street Address][City, ST ZIP Code][Phone]	<b>hip to: Mozart Town Brol</b> [Street Address] Salzburg, Austria [Phone]	karage
Qty	Description	Unit Price	Line Total
1	Shipping Samples (20 lb, bulk)	\$ 255	\$ 255
Ref.	Samples to Distributor in Austria		\$ 255
	Pearl's Jam Strawbery Pearl's Jam Orange	Sales Tax Total	
	Pearl's Jam Grape Pearl's Jam Raspberry Pearl's Jam Cherry Pearl's Jam Apricot		\$ 255

WUSATA SAMPLE ONLY Pearl's Jam ADDRESS CITY, SATE, ZIP	<b>1234</b> 01-23456789 DATE 8-6-2018
PAY TO THE ORDER OF Global Shipping	\$ 255.00
Two Hundred Fifty Five Dollars and 00 c	cents USD DOLLARS
FundMatch Bank ADDRESS	
CITY, SATE, ZIP	PICI.
FOR Invoice #672018	Pearl Johnson
XXXXXX XXXXXXXXX XXXXXXXX	X1234

WUSATA SAMPLE ONLY

## **Checking Account**

ACCOUNT #: xxxxx1234 | August 1, 2018 – August 31, 2018 | Page 1 of 20



## Pearl's Jam

ADDRESS CITY, STATE, ZIP

## **Account Summary**

### Credits

#### **Electronic deposits/bank credits**

Date A	Amount	Description
8/5	578.03	In wire; ref. 12345645654xxxxx
8/15	2,111.29	Daily deposits
8/30	7,133.82	Daily deposits

### Debits

#### Checks paid

•					
Check Number	Amount D	Date	Check Number	Amount	Date
1234	100.00	8/2	1241	7,150.00	8/16
1235	350.00	8/3	1242	80.00	8/17
1236	3,841.96	8/5	1243	650.00	8/19
<mark>1237</mark>	<mark>255.00</mark>	<mark>8/6</mark>	1244	1,294.35	8/20
1238	1,250.00 8	3/10	1245	13,072.68	8/23
1239	7482.79 8	3/12	1246	4,000.00	8/23
1240	58,787.08 8	3/15	1247	200.00	8/29

#### Electronic withdrawals/bank debits

Date	Amount	Description
8/3	13 <i>,</i> 065.94	Wire transfer to ABC Company; ref. 1234567599xxxx
8/11	2,000	Withdrawal
8/28	948.31	Wire transfer to Bank; ref. 1234567637xxxx