TERM SHEET SUPPLEMENT

BENEFICIARY BANK INFORMATION

This form is to be completed in accordance with the appended Term Sheet to advise us of the Beneficiary Bank and Account in the event that you have not previously provided this information.

This document must be signed by the actual signatories of the Bank Account being provided. Term Sheet Reference: Name Company __ 20 _____ Date Please complete your proposed Receiving Bank details below. Please complete all sections in full. The name of the account (i.e. the beneficial owner or principal of the account) must be the same as the Principal as stated within the Term Sheet). Bank Name Bank Address Country: _____ Name of Account **IBAN Account Number** SWIFT or BIC The above bank details have been provided to IntaCapital Swiss SA in accordance with the terms and conditions of the above referenced Term Sheet. By supplying these details, I/We confirm that the above bank account is in the name and sole control of the names signatories below and that matches the Principal as stated within the above referenced Term Sheet. I/We also understand that by making any false or misleading statements herein will invalidate the Term Sheet or may effect our application. The information provided above should be kept in the strictest confidence and only disclosed to those parties involved within the intended transactions. I/We understand that the Provider (as stated within the Term Sheet) may use this information for due diligence and underwriting purposes in relation to the verification of information and may request the issuing bank to contact this bank for verification of this information being provided. **First Account Holder Signatory** (1) Signed Name of Signatory Date of Signature Second Account Holder Signatory (If applicable) (2) Signed Name of Signatory

Date of Signature