

# INVAG

## INVERSIONES DE VALOR AGREGADO S.A. DE C.V.

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Date:

This request for the transfer of funds, using the INVAG Transfer Process, is from:

FIDES Account #:

FIDES Account Holder:

FIDES Account Authority Name:

Amount to be transferred:

Independent Contractor Name:

This transfer request is for funds which are to be used for the following purpose(s):

IN ORDER FOR THIS TO BE ACCOMPLISHED, THERE MUST BE SUFFICIENT FUNDS IN THE FIDES ACCOUNT AND ALL SERVICE FEES DUE TO FIDES MUST BE CURRENT. FIDES ACCOUNT STATUS:

- |   |   |     |    |
|---|---|-----|----|
| 1 | ARE THE FIDES ACCOUNT SERVICE FEES 100% UP TO DATE?<br>(Independent Contractor shall cause the FIDES Account Fees to be current prior to submitting the request.) | Yes | No |
| 2 | ARE THERE SUFFICIENT FUNDS IN THE ACCOUNT TO SATISFY THIS REQUEST?  | Yes | No |

**IN PREPARATION FOR THIS REQUEST I HAVE PROVIDED REFERRALS TO MY INDEPENDENT CONTRACTOR THROUGH WHICH THE CONTRACTOR HAS ALREADY ARRANGED THE PURCHASE OF UAWS AND/OR SUPER UAWS THAT HAVE ALREADY BEEN PAID FOR, AND I WILL PROVIDE ANY ADDITIONAL REFERRALS FOR BUSINESS TO BE TRANSACTED THAT MAY BE REQUIRED FOR MY REQUEST TO BE ACCEPTED AND PROCESSED.**

I authorize the transaction as listed above to occur on my behalf of the FIDES Account referenced above.

\_\_\_\_\_  
FIDES ACCOUNT AUTHORITY (*Signature*)

\_\_\_\_\_  
WITNESS OR NOTARY

SIGNED AND DATED ON:

CONFIRMED BY (IC): \_\_\_\_\_ DATE: \_\_\_\_\_.