**** MUST BE ON INVESTOR LETTERHEAD ****

FOR THE CLIENT CONSULTANT(S)

DATE:	, 2016
RE: PRIVATE PLACEMENT OPPORTUNITY	
REFFERENCE:	
TRANSACTION CODE:	
I,, Holder ofPassport Number:, <title_> and Authorised Signatory for, with full personal and/or corporate and legal authority and responsibility, under penalty of perjury, do hereby issue this irrevocable and unconditional INSTRUCTION to you to disburse, immediately and simultaneously, without protest, delay or deductions, either by SWIFT or FED Wire, a TOTAL OF FIVE (5%) PERCENT CONSULTANCY FEE FOR THE CLIENT INTRODUCERS of the Payer/Investor's Share of GROSS PROFIT realized through successful participation in the above referenced Transaction, to the CONSULTANTS / BENEFICIARIES, via the PAYMASTER as nominated hereunder, or otherwise provided by the Beneficiaries, for any further distributions to any due Consultants involved in the Transaction:</title_>	
5% (FIVE) PERCENT FOR THE CLIENT CONSULTANT(S)	
PAYMASTER	
Bank Coordinates	Account name: Account no.: Bank Name: Beneficiary Bank code: Bank address: Swift Code:
Beneficiaries	INTERMEDIARIES (5%) FIVE PERCENT 1. 2. 3. 4.
This INSTRUCTION is issued pursuant to and in acknowledgement of our responsibilities under stipulations of the CONSULTING FEE PROTECTION AGREEMENT / IRREVOCABLE	

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Irrevocable Pay Order Directive

Investor's Initial: _____

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PAYMENT ORDER DIRECTIVE. Payer/Investor agrees and warrants that this DIRECTIVE shall remain irrevocable, unchangeable, unconditional, divisible, and assignable; and shall remain binding and enforceable for the full term of this Transaction and apply to all extensions, additions, rollovers, renewals and/or re-negotiated transactions leading to new contracts thereof; and shall include all Parties hereto as well as their respective heirs, executors, administrators, personal representatives, trustees, successors and permitted assigns, for a period of FIVE (5) YEARS from the date of the execution of the Trade Contract(s), and automatic extension for continuing Trading activities.

ACKNOWLEDGEMENT

We hereby acknowledge receipt of your INSTRUCTION and will act accordingly without protest and delay.

For and on behalf of: (Company Name or Individual's Full Name)

Name: Mr.

Its: Authorized Signatory

As: Payer/Investor

Date:

CORPORATE SEAL OR NOTARY SEAL)