

BANK INFORMATION FORM



Agent Name			Agent Code		
Method: <input type="checkbox"/> ACH <input type="checkbox"/> Wire Transfer			Effective Date	MONTH / DAY / YEAR	

SECTION 1: FOR ACH ONLY

Type of account	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	Account Number		ABA / Routing Number	
Account Holder Name: <input type="checkbox"/> Same as Agent <input type="checkbox"/> Third Party					

SECTION 2: FOR WIRE TRANSFERS ONLY

SECTION 2A: BENEFICIARY INFORMATION

Type of account	<input type="checkbox"/> Checking <input type="checkbox"/> Savings					
Account Number		SWIFT/CHIPS number		IBAN number		
Account Holder Name <input type="checkbox"/> Same as Agent <input type="checkbox"/> Third Party						
Bank name						
Address						
ZIP code		City/State		Country		

SECTION 2B: ** FOR INTERNATIONAL WIRE TRANSFERS ONLY. INTERMEDIARY FINANCIAL INSTITUTION

Bank name				Account Number	
ABA number		SWIFT/CHIPS number		IBAN number	
Address					
ZIP code		City/State		Country	

SECTION 3: THIRD PARTY PAYMENT AUTHORIZATION

The Agent hereby authorizes Bupa Worldwide Corporation and all of its affiliates (jointly "Bupa") to pay to the third party indicated above (the "Third Party") all commissions earned, due and payable by Bupa. Any payments pursuant to this Authorization, shall be full and complete satisfaction and discharge of Bupa's obligations to Agent concerning such payment(s), and Agent hereby fully releases and waives any and all right to claim from Bupa any amounts paid to the Third Party hereunder. This Authorization shall remain in effect until revoked by the agent in a writing sent to and acknowledge by Bupa.

The Agent and Third Party each acknowledge, warrant and represent that: (a) any obligation by Bupa to pay commissions is subject to the terms and conditions of any and all agreement(s) that may be in force between the Company and Agent; (b) notwithstanding the terms of this Authorization or of any agreement among the parties hereto, or any of them, Bupa shall have no obligation to, and shall not, make any payment to any person in violation of applicable law or regulations, including, without limitation, the sanctions regulations of the U.S. Treasury Department's Office of Foreign Asset Control; (c) the commissions that are the subject of this authorization are not subject to any other authorization or assignment; (d) the Third Party is duly authorized to receive the payment of the commissions referred herein; (e) Bupa is not responsible for the validity, sufficiency or legal or tax consequences of this Authorization, including any reporting of the payment to the Agent on Form 1099 of the IRS or any other form; (f) the Agent acknowledges that it shall retain all tax liability for commissions paid under this authorization and may receive tax forms, such as Form 1099, from Bupa with respect to the commissions; and (g) the Authorization shall not be effective unless acknowledged by Bupa. Agent and Third Party hereby agree to defend, indemnify and hold Bupa fully harmless, to the fullest extent permitted by law, from and against any claims, damages or losses of any nature whatsoever, including Bupa's reasonable attorneys' fees, that may arise from this Authorization and/or as a result from any breach of the foregoing representations and warranties.

This Authorization shall be governed by the laws of the State of Florida, without regard to its principles of conflicts of law. The parties to this Authorization hereby submit to the sole and exclusive jurisdiction of the state and federal courts located in Miami-Dade County, Florida, for the resolution of any dispute relating to or arising out of or relating to this Authorization.

SIGNATURES

Agent Name			
Signature		Date	MONTH / DAY / YEAR
Third Party Name			
Signature		Date	MONTH / DAY / YEAR

FOR ACCOUNTING USE ONLY

Is W8 / W9 for the Agent included?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is this is a third party account? If Yes: Is Third Party Authorization and KYC completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
If one of the documents is missing, do not process the bank info. and return to the agent. The Agent must always submit to Bupa the applicable W-8 or W-9 form, regardless of whether this form includes a third-party authorization.	

Bupa Worldwide Corporation

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