

uFactor – ADVANCE PAYMENT

To: United Overseas Bank (Malaysia) Bhd (271809K)

Level 7, Bangunan UOB 10-12 Medan Pasar 50050 Kuala Lumpur

| Client Particulars | | | | |
|-----------------------------------------------------------------------------------------------------------------|----|----|----|----------------------------|
| Date | | | | Client Code: |
| | | | | |
| Name of Client | | | | |
| | | | | |
| Address | | | | |
| | | | | |
| Request of Advance Payment | | | | |
| Request of Advance i dyment | | | | |
| We refer to the facilities extended to us under uFactor. | | | | |
| | | | | |
| | | | | |
| Upon and subject to the terms of the facilities, we hereby irrevocably and unconditionally request that you pay | | | | |
| the sum of | | | on | as Advance Payment to |
| our UOB Current Account number: | | | | |
| | | | | |
| | | | | |
| | | | | |
| (For Bank's use Only) | | | | |
| Signature(s) Checked Input Approved | | | | |
| Verified By | By | Ву | Ву | |
| | | | | |
| Batch Code | | | | Authorized Signatures(s) & |
| | | | | Company Stamp |