

SBLC FACILITY INVOICE

Invoice Number: _____ Date of Issue: _____

Facility Agreement Ref: _____ Due Date: _____

SBLC Reference No: _____ Currency: _____

ISSUER / CREDITOR

APPLICANT / DEBTOR

_____	_____
_____	_____
_____	_____
_____	_____

STANDBY LETTER OF CREDIT (SBLC) FACILITY DETAILS

SBLC Face Amount	_____	Beneficiary	_____
Effective Date	_____	Expiry Date	_____
Issuing Bank	_____	Advising Bank	_____

FEE BREAKDOWN

DESCRIPTION OF FEE / CHARGES	RATE / %	AMOUNT
Facility Commitment / Issuance Fee	_____	_____
Arrangement / Establishment Fee	_____	_____
Utilization Fee	_____	_____
SWIFT / Cable Transmission Charges	_____	_____
Legal & Administrative Expenses	_____	_____
Amendment Fees (if applicable)	_____	_____

Subtotal: _____

Taxes / Vat: _____

Total Amount Due: _____

SETTLEMENT INSTRUCTIONS / WIRE DETAILS

Please remit payment via wire transfer matching the following details:

Beneficiary Bank:

Bank Address:

SWIFT / BIC Code:

IBAN / Account No:

Account Name:

Payment Reference:

Prepared By (Authorized Signatory)

Approved By (Authorized Signatory)