

#### **Contract No:**

In reference of the Grey Portland Cement grade CONTRACT NUMBER Dated and Signed on USD/MT

# GROUP GLOBAL COMPANY & INVESTIMENT WILL PAY COMMISSION TO

BY BEGINS OF DELIVERY USD/MT
TOTAL COMMISSION USD IN MONTHS OR
USD EACH MONTH.

#### **PAYER**

Company	GROUP GLOBAL COMPANY & INVESTIMENT
Address	
TEL	
E-MAIL	info@groupglobalcompany.com

#### **PAYER BANK DETAILS**

Bank Name	
Bank Address	
Account Name	
Account No.	
IBAN	
Swift Code	
Phone	

1. This sub-fee protection agreement ("SFPA") is issued on behalf of the Payer (also known as the "Payer": GROUP GLOBAL COMPANY involved in the sale of the Commodity identified by the above Contract Number. Commission payment/s will be made after the delivery and payment for each shipment. The commission will be paid by the Intermediaries' Beneficiary Paymaster to the intermediaries named in this SFPA for all contracted quantity including all extensions and rollovers on shipment by shipment basis as per the following proceeds:



#### **Contract No:**

- **1.1** Payable upon payment for each and every shipment, by SWIFT or similar wire transfer.
- 1.2 The payments will be made without protest, delay or deductions (other than normal bank wire transfer fees and a standard paymaster fee percentage).
- **1.3** The entitlement under this SFPA covers the entire transaction identified and defined herein including all extensions and rollovers.
- 1.4 All parties involved in this transaction herewith irrevocably agree that they do not assume any responsibility for the above named transaction and cannot be held liable for any reason associated with it. Nothing in this SFPA construes or creates a partnership or employee/employer relationship between the parties to it, and/or the buyer, and/or the seller.
- 1.5 This SFPA shall be valid, legally binding and enforceable even if any of the transaction codes are changed by the bank, and/or by any of the parties to this SFPA at any point during the transaction. However, the intermediaries listed in this SFPA shall be entitled to change their bank details at any time upon reasonable notice in writing.
- **1.6** All disputes arising regarding this SFPA shall be resolved by binding arbitration in Spokane Washington under United States law. (Seller my change)
- 1.7 All parties involved in this transaction herby agree not to circumvent each other in this transaction, or in any transaction pending, or in any transaction in the future, whether directly or indirectly, for a period of five (5) years.
- 1.8 For the avoidance of doubt, the intermediaries named in this SFPA may assign the fees they receive under the relevant transaction, in part or in whole as may be their choice.
- **1.9** Electronic and/or faxed transmission of the signed SFPA shall be valid, legally binding and enforceable in respect of all its provisions.
- 2. I, the undersigned Payer, GROUP GLOBAL COMPANY, do hereby irrevocably and unconditionally undertake to pay the commission specified in this SFPA in United States Dollars, in favor of the paymaster named herein.

The commission in this SFPA becomes payable only if the referenced transaction has successfully been concluded, and payment for the commodity has been made by the Buyer.

The responsibility of the undersigned Intermediaries' Beneficiary Paymaster is limited to the transfer of the entitlement to the intermediaries, only and whenever the relevant commodity has been paid by the Buyer, and to the observance of the practices of the relevant contracts and NCNDA's.



### **Contract No:**

All transfers are subject to deduction of standard bank charges in relation to the transfer to the individual beneficiary account. This deduction will be to the account of the receiving beneficiary.

The parties agree that faxed and or e-mailed electronically signed and sealed copies of this Fee Protection Agreement will be of full force and effect.

Natal, , 2009

**GROUP GLOBAL COMPANY** 



## **Contract No:**

### **BENEFICIARY PAYMASTER**

Name:		
Name:		
Address:		
Phone/Fax:		
E-Mail:		
Passport No.:		
Account Name:		
On Behalf of Beneficiaries:		
Bank Name:		
SWIFT:		
IBAN:		
Sort Code:		
Account Number:		
Branch Bank Address:		
Branch Bank Officer Name:		
Branch Bank Officer Tel.:		
Branch Bank Fax:		