



OUTGOING PAYMENT TRANSFER

DATE

T O	BRANCH/AGENCY/CORRESPONDENT SIJL - WELLS FARGO WFBIUS6S MT103		TEST No.	CURRENCY USD	AMOUNT
	ADDRESS Philadelphia P.A., ABA 121000248		TRANSIT NUMBER	SELLING RATE @	=

PLEASE PAY	20	SENDER'S REFERENCE NUMBER	21	RELATED REFERENCE	23	BANK OPERATION CODE/ INSTRUCTION CODE	FOR BANK USE ONLY	
							SETTLING RATE	SETTLING AMOUNT

FOR CUSTOMER USE				FOR BANK USE ONLY			
32	VALUE DATE (YYYY/MM/DD)	CURRENCY USD	AMOUNT	FOREIGN EXCHANGE GL # 7301960			
50	ORDERING CUSTOMER			COMMISSION GL # 7246269			
	FULL NAME			CHARGES TELEGRAPH TOLLS RECOVERED GL # 6429866			
	FULL ADDRESS			OTHER GL #			
	ACCOUNT NUMBER			TOTAL CUSTOMER CHARGES			
52	ORDERING INSTITUTION Scotia Investments Ja Limited 7 Holborn Road Kingston 10			<p>"WE", "US", "OUR", "THE BANK" AND "SCOTIABANK" MEANS, THE BANK OF NOVA SCOTIA AND ITS SUBSIDIARIES AND AFFILIATES, AS APPLICABLE. "SCOTIABANK GROUP" MEANS COLLECTIVELY, THE BANK OF NOVA SCOTIA AND ALL OF ITS SUBSIDIARIES AND AFFILIATES.</p> <p>"YOU" AND "YOUR" MEANS THE ORDERING CUSTOMER.</p> <p>YOU MUST PROVIDE US WITH YOUR AND THE BENEFICIARY CUSTOMER'S COMPLETE NAME, ADDRESS AND ACCOUNT NUMBER. PROVIDING FULL DETAILS AND CORRECT ACCOUNT NUMBERS AVOIDS DELAYS AND CHARGES BY THE INTERMEDIARY/BENEFICIARY BANK. CERTAIN COUNTRIES AND REGIONS REQUIRE YOU TO PROVIDE YOUR AND/OR THE BENEFICIARY'S ACCOUNT NUMBER.</p> <p>PAYMENT TRANSFERS DESTINED TO COUNTRIES THAT ARE PART OF THE EUROPEAN ECONOMIC UNION MUST ALSO INCLUDE THE BENEFICIARY CUSTOMER'S INTERNATIONAL BANK ACCOUNT NUMBER (IBAN) IN THE ACCOUNT NUMBER FIELD. FOR PAYMENT TRANSFERS DESTINED TO OR WITHIN THE UNITED STATES YOU MUST ENSURE YOU HAVE PROVIDED US WITH THE CORRECT BENEFICIARY ACCOUNT NUMBER AS THE ACCOUNT NUMBER TAKES PRECEDENCE OVER THE BENEFICIARY NAME.</p> <p>WE WILL NOT BE RESPONSIBLE FOR ANY DELAYS, ERRORS OR LOSSES YOU OR ANY ENTITY MAY SUFFER AS A RESULT OF THE DELIVERY MECHANISM USED TO PROCESS THIS PAYMENT TRANSFER. ADDITIONAL FEES MAY BE DEDUCTED FROM THE PAYMENT TRANSFER BY THE CORRESPONDENT AND BENEFICIARY BANK.</p> <p>IF THE PAYMENT TRANSFER IS NOT COMPLETED FOR ANY REASON WHATSOEVER, WE WILL REFUND YOU THE ORIGINAL PAYMENT TRANSFER AMOUNT, LESS ANY EXPENSES AND LOSSES (IF ANY) AND RISKS FROM EXCHANGE RATE FLUCTUATIONS, UPON RECEIPT OF THE RETURNED PAYMENT TRANSFER FROM OUR AGENT OR CORRESPONDENT BANK. THE ORIGINAL PAYMENT TRANSFER FEES ARE NON-REFUNDABLE.</p> <p>YOU CONSENT AND AUTHORIZE US TO OBTAIN, USE, GIVE TO, VERIFY, SHARE AND EXCHANGE INFORMATION ABOUT YOU WITH OUR SERVICE PROVIDERS AND ANY OTHER PERSON(S) AS MAY BE PERMITTED OR REQUIRED BY LAW.</p> <p>YOU ALSO CONSENT AND AUTHORIZE US TO DISCLOSE INFORMATION ABOUT YOU TO THIRD PARTIES WHERE SUCH DISCLOSURE IS: (A) IN OUR DISCRETION, NECESSARY OR DESIRABLE WHETHER TO PROTECT OUR INTERESTS, OR OTHERWISE, (B) REQUIRED IN ORDER TO COMPLY WITH ANY DISCLOSURE REQUIREMENTS IMPOSED BY LAW, REGULATION, COURT, GOVERNMENTAL AGENCY OR AUTHORITY OR GOVERNMENTAL DEPARTMENT, OR (C) IN ORDER TO PREVENT OR DETECT CRIMINAL ACTIVITY, MANAGE AND SETTLE ANY ACTUAL OR POTENTIAL LOSS IN CONNECTION WITH FRAUD OR CRIMINAL ACTIVITY, FACILITATE AN INVESTIGATION OF OR PROSECUTION FOR FRAUD, MONEY LAUNDERING OR ANY OTHER CRIMINAL ACTIVITY. YOU ALSO CONSENT AND AUTHORIZE US TO SHARE YOUR INFORMATION WITHIN THE SCOTIABANK GROUP OF COMPANIES.</p> <p>WE MAY USE THIRD PARTY SERVICE PROVIDERS TO PROCESS THIS PAYMENT TRANSFER FOR US. SOME OF OUR SERVICE PROVIDERS ARE LOCATED OUTSIDE THE COUNTRY WHERE THE PAYMENT TRANSFER REQUEST ORIGINATED AND THESE SERVICE PROVIDERS ARE SUBJECT TO FOREIGN LEGISLATION. YOU UNDERSTAND AND ACKNOWLEDGE THAT LAW ENFORCEMENT AUTHORITIES AND/OR GOVERNMENTAL AUTHORITIES IN THESE JURISDICTIONS MAY, UNDER APPLICABLE LEGISLATION, ACCESS THE INFORMATION AND DATA CONTAINED IN THIS FORM AND IN EFFECTING SUCH DISCLOSURES NEITHER WE, OR ANY OF OUR RESPECTIVE OFFICERS, DIRECTORS, EMPLOYEES OR AGENTS SHALL IN ANY WAY BE LIABLE TO YOU FOR THE BREACH OF ANY PRIVACY, SECRECY OR CONFIDENTIALITY PROVISIONS OF ANY LAWS OR REGULATIONS IN YOUR COUNTRY OR ELSEWHERE. YOU AGREE TO INDEMNIFY US AND OUR RESPECTIVE OFFICERS, DIRECTORS, EMPLOYEES OR AGENTS AGAINST ANY AND ALL LOSSES, COSTS, EXPENSES, ACTIONS, PROCEEDINGS, CLAIMS, DAMAGES OR OTHER LIABILITIES (INCLUDING LEGAL FEES AND EXPENSES) ARISING DIRECTLY OR INDIRECTLY, BY REASON OF SUCH DISCLOSURES BY US OR ANY OF OUR RESPECTIVE AGENTS, SUCH INDEMNITY BEING IN ADDITION TO ANY INDEMNITY WHICH MAY BE AVAILABLE AT LAW.</p>			
53	SENDER'S CORRESPONDENT Scotia Investments Ja Limited 7 Holborn Road Kingston 10 SWIFT SCNJJMKN a/c 2000035289616						
54	RECEIVER'S CORRESPONDENT						
56	INTERMEDIARY INSTITUTION						
57	ACCOUNT WITH INSTITUTION						
58	BENEFICIARY INSTITUTION						
ROUTING#		SWIFT:					
59	BENEFICIARY CUSTOMER, FULL NAME, FULL ADDRESS						
	FULL NAME						
	FULL ADDRESS						
	BENEFICIARY ACCOUNT NUMBER						
70	REMITTANCE INFORMATION						
71	DETAILS OF CHARGES						
72	SENDER TO RECEIVER INFORMATION						

CUSTOMER SIGNATURE	PHONE NUMBER
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BANK LEGAL NAME	PREPARED BY	CHECKED BY	AUTHORIZED BY
BRANCH ADDRESS			

FOR BANK USE ONLY	If yes, Customer contacted		Date	Time
Call back required <input type="checkbox"/> yes <input type="checkbox"/> no				

Management Officer	Signing Number
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