

TO: Washington Mutual Bank (Co.1) Washington Mutual Bank, FA (Co.2)
 Washington Mutual Bank, fsb (Co.40) Other _____

Please issue on our behalf an irrevocable letter of credit on the following terms and conditions.

| | | | | |
|------|--------------------|-----------------------|---------------------|---|
| DATE | CUSTOMER REFERENCE | L/C NUMBER (BANK USE) | CURRENCY AND AMOUNT | EXPIRY DATE IN BENEFICIARY'S COUNTRY |
|------|--------------------|-----------------------|---------------------|---|

ISSUE BY: Full Transmission Courier _____

| | |
|--------------------------------|------------------------------|
| ACCOUNT PARTY (NAME & ADDRESS) | BENEFICIARY (NAME & ADDRESS) |
|--------------------------------|------------------------------|

| | |
|---|--|
| ADVISING BANK (NAME & COMPLETE ADDRESS) | LATEST SHIPMENT DATE |
| | The beneficiary is authorized to draw its draft(s) for full invoice value drawn at _____ sight on you or your correspondent at your option (or you may waive draft requirement). |

CREDIT TRANSFERABLE PARTIAL SHIPMENTS TRANSHIPMENT
 YES NO YES NO YES NO

REQUIRED documents marked "X" must be presented in one original and one copy unless otherwise specified:

Signed commercial invoice
 Packing list
 Certificate of Origin
 Insurance policy or certificate endorsed in blank covering all risks and war risks for at least 110 percent of invoice value stating a claims settling agent in the United States of America and indicating claims payable in U.S. dollars.
 Full set of clean "on board" Port to Port Marine Bill of Lading Multimodal transport document Consigned to order of shipper and blank endorsed
Marked: Freight Collect Prepaid and Notify _____
 Clean original (shipper's copy) air waybill consigned to: _____
Marked: Freight Collect Prepaid and Notify _____
 Beneficiary's Certificate stating that one set of non-negotiable documents has been sent to _____ Within _____ days of shipment.

Other Documents:

SHIPMENT FROM: _____ TRANSPORT TO: _____
COVERING (mention commodity only in generic terms omitting details as to grade, quality, etc.):

In accordance with Applicant's Purchase Order Number _____
TRADE TERMS: Incoterms 2000 (or future revisions) CIF FOB CIP CFR Other _____

SPECIAL CONDITIONS

Period for presentation of documents: _____ days after date of shipment. Charges outside issuing bank
 Applicant Beneficiary

SHIPPING DOCUMENTS TO BE PICKED UP BY COURIER TO MAIL TO

| | |
|------------------|--------------|
| NAME AND ADDRESS | PHONE NUMBER |
|------------------|--------------|

FIRST TIME APPLICANTS: THIS APPLICATION MUST BE ACCOMPANIED BY AN EXECUTED CONTINUING AGREEMENT FOR COMMERCIAL LETTERS OF CREDIT.

Applicant agrees to all terms and conditions set forth above and in the most recent Continuing Agreement for Commercial Letters of Credit executed by Applicant.

| | | |
|---------------------------|------------------|------------------|
| ACCOUNT NUMBER | TELEPHONE NUMBER | APPLICANT'S NAME |
| STREET ADDRESS | CITY | STATE ZIP |
| AUTHORIZED SIGNATURE X | TITLE | |

| | | |
|--------------------------------|--|---|
| ADMINISTRATIVE USE ONLY | Applicant's signature is verified and authority to sign is confirmed. This extension of credit is approved in accordance with the Bank's current requirements. | |
| OFFICER'S SIGNATURE X | OFFICER'S NAME & NUMBER (PLEASE PRINT) | FEE - STANDARD UNLESS NOTED <input type="checkbox"/> Other _____ |
| MAILSTOP | COMPANY/COST CENTER | TELEPHONE NUMBER |