

FEES AND PAYMENT INSTRUCTIONS

| PACKAGE | LOCATION | TRADE CATEGORY | MIN. BOOTH SIZE ALLOWED | RATE | BOOTH INCLUSION |
|-----------------------------|------------|-----------------|-------------------------|--|--|
| Raw Space | WTC | Export | 18 sqm. | Php3,600 per sqm | To be provided by the exhibitor |
| Raw Space with Booth System | WTC – Tent | Export / Retail | 9 sqm. | Php3,200 per sqm (raw space) Php4,050 per sqm (raw space with booth system) | Booth system and 600 watts electrical connection |

| | | |
|------------------------------------|-------------|---------------------------------|
| Product Development Engagement Fee | Php5,000.00 | Furniture – 2 to 3 products |
| | | Non-Furniture – 5 to 6 products |

PARTICIPATION DISCOUNT

NOTE: Computed on the space cost only and is not applicable to the booth system cost.

| | |
|-------------------|-----|
| 9 sqm. | 10% |
| 18 sqm. – 27 sqm. | 20% |
| 36 sqm. – 63 sqm. | 30% |
| 72 sqm. And above | 35% |

SCHEDULE OF PAYMENT

| | |
|--------------------------------------|-----------------|
| a. Reservation Fee of PHP 10,000.00 | 31 January 2017 |
| b. Full Payment of Participation Fee | 10 March 2017 |

Payment shall only be facilitated upon submission of all the documents needed as specified in the Checklist of Requirements and upon receipt of the Notice of Acceptance Letter.

| METHOD OF PAYMENT | WHERE TO PAY |
|-------------------|--|
| 1. Cash | CITEM Cashier or Online Payment |
| 2. Check | CITEM Cashier or Online Payment |
| 3. Credit Card | CITEM Cashier for VISA Cardholder only |

Details of Online Payment

Bank : Philippine National Bank
Branch : Roxas Boulevard, Pasay City
Account Name : CITEM
Account Number : 400-562-400429

Attached is a sample copy of the PNB Deposit/Bills Payment Slip. Upon payment of fees, send the proof of Deposit/Bills Payment Slip for validation to fax number (632) 834-0188 or email exhibitormarketing@gmail.com. Please write your company name legibly, preferably in PRINT.

Sample PNB Deposit / Bills Payment Slip

Swift Code: PNBMPHMM

| PNB | | DEPOSIT / BILLS PAYMENT SLIP | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|------------------------------|--|--|--|--|--|--|--|--|--|--|--|---|---|---|---|---|---|---------------|---|---|---|---|---|-------------|--|--|--|--|--|
| PLEASE CHECK THE APPROPRIATE BOXES | | | | | | | | | | | | | | DATE | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> DEPOSIT <input type="checkbox"/> PAYMENT | | | | | | | | | | | | | | CURRENCY | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> SAVINGS <input type="checkbox"/> CURRENT | | | | | | | | | | | | | | <input checked="" type="checkbox"/> PESO <input type="checkbox"/> US DOLLAR <input type="checkbox"/> OTHERS | | | | | | | | | | | | | | | | | |
| ACCOUNT NUMBER | | | | | | | | | | | | | | 4 | 0 | 0 | 5 | 6 | 2 | 4 | 0 | 0 | 4 | 2 | 9 | | | | | | |
| ACCOUNT/ MERCHANT'S NAME | | | | | | | | | | | | | | CITEM | | | | | | | | | | | | | | | | | |
| (BILLS PAYMENT ONLY) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| POLICY/ PLAN/ REFERENCE NO | | | | | | | | | | | | | | Invoice Number | | | | | | | | | | | | | | | | | |
| POLICY/ PLANHOLDER'S NAME | | | | | | | | | | | | | | Company Name (please write in PRINT) | | | | | | | | | | | | | | | | | |
| DEBIT MY ACCOUNT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ACCOUNT NAME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| This is to certify that I/we am/are effecting the above transaction and, in case it is a joint account, I/we declare under the penalties of perjury that my/our co-depositor/s is/are still living. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ACCOUNTHOLDER'S SIGNATURE | | | | | | | | | | | | | | ACCOUNTHOLDER'S SIGNATURE | | | | | | SIG. VERIFIED | | | | | | APPROVED BY | | | | | |
| TYPE OF DEPOSIT/BILLS PAYMENT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (PLEASE USE SEPARATE SLIP FOR EACH TYPE OF DEPOSIT/BILLS PAYMENT) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> CASH | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> CHECK (PLEASE INDICATE CHECK DETAILS BELOW) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| BANK NAME & LOCATION | | | | | | | | | | | | | | CHECK NO | | | | | | AMOUNT | | | | | | | | | | | |
| 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL CASH or CHECK DEPOSIT or BILLS PAYMENT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TELLER'S VALIDATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

FORM 2228