

BILL PAYMENT / PAGO DE FACTURAS

Name of Account/Nombre de la Cuenta: _____

Account No./No. de Cuenta: _____

Date/Fecha: _____

The undersigned, hereby instructs Helm Bank USA (the "Bank"), and authorizes Bank, to amend the information for the above referenced account and/or to provide the accountholder(s) with the Bank's products or services in accordance with the instructions set forth herein. In furtherance of such instructions and authorization, the undersigned agrees to be bound, with respect to each account, product or service established by or made available by the Bank from time to time, by the **Account Agreement – Terms and Conditions**, as amended from time to time (the "Account Agreement"), which are hereby incorporated by reference.

*El/Los suscrito(s) a través de este documento instruye(n) y autoriza(n) Helm Bank USA ("Banco"), enmendar la información de la cuenta designada más arriba y/o proporcionar al(los) titular(es) de la cuenta los productos o servicios del Banco de acuerdo con las instrucciones establecidas en la presente solicitud. En cumplimiento con dichas instrucciones y autorización, el/os suscrito(s) se obliga(n) a cumplir, en relación con cada cuenta, producto o servicio establecido por o proporcionado por el Banco periódicamente, con el **Acuerdo de Cuenta - Términos y Condiciones**, según enmendado periódicamente (el "Acuerdo de Cuenta"), que se incorporan por referencia*

BILL PAYMENT / PAGOS DE FACTURA

Please complete the information below / Por favor completar la información a continuación.

I hereby authorize Helm Bank USA to pay, on my behalf, the following bill, in the amounts and dates specified below:
 Por la presente autorizo a Helm Bank USA a pagar, en mi nombre, la siguiente factura, en los montos y fechas especificadas a continuación:

Payee Name <i>Nombre del Beneficiario</i>	Payee Address <i>Dirección del Beneficiario</i>	Amount <i>Monto</i>	Payment Date <i>Fecha de Pago</i>

REPRESENTATIONS, WARRANTIES AND CONSENT / REPRESENTACION Y GARANTIAS

BY SIGNING BELOW, the undersigned hereby represent(s), warrant(s), acknowledge(s) and agree(s) that: (i) all information furnished to Bank herein is true and correct; (ii) the undersigned acknowledge(s) receipt of and consent(s) to the Account Agreement, Products, Services & Fee Schedule, Privacy Policy, Funds Availability Policy and such other disclosures relating to the Account(s), each as may be amended from time to time; (iii) the undersigned and each Authorized Person (as such term is defined in the Account Agreement) designated on the Signature Card or Officer's Certification and Corporate Signature Card (as the case may be) for the Account(s) are duly authorized to act for and on behalf of the Account(s); (iv) any Account(s) constituting a Time Deposit must be used only in accordance with the terms of the Account Agreement; and (v) the undersigned hereby agree(s) to notify Bank immediately of any changes to any information furnished by the undersigned in connection with any Account(s) established by the undersigned from time to time.

AUTHORIZED SIGNER / FIRMA AUTORIZADA Name / Nombre _____	<div style="border: 2px solid black; height: 50px; width: 100%;"></div>
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AUTHORIZED SIGNER / FIRMA AUTORIZADA Name / Nombre _____	<div style="border: 2px solid black; height: 50px; width: 100%;"></div>
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The translation of this document is for your information and convenience only. The English version constitutes the legally binding version and, in the event of any inconsistency with the translation, the English version shall prevail.

La traducción de este documento es únicamente para su información y facilidad de entendimiento. La versión en inglés constituye la versión dispositiva jurídicamente, y en caso de cualquier inconsistencia con la traducción del presente documento, la versión en inglés será la versión determinante.