

## Addresss: 5775 Yonge Street, Toronto, Ontario, M2M4J1 Canada Toll Free Telephone: 1-888-712-9999 - Local Telephone: 416-488-8822 Toll Free Fax: 1-800-428-2916 Local Fax: 416-488-4022 Email: Service@TaheriExchange.com Web: www.TaheriExchange.com

|   |  |   |   |   |  |  |   |  |                              |                                |                          |        |                         | Date                           |                               |                            |                          |
|---|--|---|---|---|--|--|---|--|------------------------------|--------------------------------|--------------------------|--------|-------------------------|--------------------------------|-------------------------------|----------------------------|--------------------------|
| Ordering Client First Name  |  |   |   |   |  |  |   |  | Last Na                      | ame                            |                          |        |                         |                                |                               |                            |                          |
| ID#   |  |   |   |   | Type of ID   |  |   |  | Occu                         |                                |                          | ion    |                         |                                |                               |                            |                          |
| Telephone 1   |  | one 2   |   |   |  | Email  |   |  |                              |                                |                          |        |                         |                                |                               |                            |                          |
| Address   |  |   |   |   |  |  | City  |  |                              |                                |                          | P      | rovince                 | Γ                              |                               |                            |                          |
| Postal Code   | Cou  |   |   |   |  |  |   | DOB                                      |                              |                                |                          |        |                         |                                |                               |                            |                          |
| Source of Funds   |  |   |   |   | Relationship to Benefi   |  |   | ficiary                                  | ciary                        |                                |                          |        |                         |                                |                               |                            |                          |
| Purpose of Transaction  |  |   |   |   |  | Emigra   | ating [   | Livin<br>Expe                            | ng<br>enses                  |                                | Medical<br>Expenses Loan |        |                         | Non-Commercial Tran<br>Savings |                               |                            | ansfer of                |
| Amount Ordering Client Pays   |  |   |   | urrency   |  | Exchange Rate *  |   |  |                              | Amount Bene                    |                          |        |                         | ry Rece                        | eives*                        | Curren                     | cy*                      |
| *Taheri Exchange reserves the right to change the contents of these fields and ordering Client consents to the same by completing this form.            |  |   |   |   |  |  |   |  |                              |                                |                          |        | n.                      |                                |                               |                            |                          |
| Beneficiary First Name last Name  |  |   |   |   |  |  |   |  |                              |                                |                          |        |                         |                                |                               |                            |                          |
|   |  |   |   |   |  |  | Add   | ress                                     |                              |                                |                          |        |                         |                                |                               |                            |                          |
| Telephone 1   |  | ne 2  |   |   | Email  |  |   |  |                              |                                |                          |        |                         |                                |                               |                            |                          |
| Country   |  |   | Province  | e 🗌   |  |  | m   |  | City                         | /                              |                          |        |                         |                                |                               |                            |                          |
| Beneficiary Banking Details   |  |   |   |   |  |  |   |  |                              |                                |                          |        |                         |                                |                               |                            |                          |
| Bank Name   |  |   | Branch/   | Transit   |  |  |   |  | Acc                          | ount #                         |                          |        |                         |                                |                               |                            |                          |
| Are you acting on behalf of a third party? (If Yes, please provide the name address, telephone number, occupation and date of birth of the 3rd party.): |  |   |   |   |  |  |   |  |                              |                                |                          |        |                         |                                |                               |                            |                          |
| consideration of 1<br>1. The services pr<br>2. The above tele<br>faxes, make telep  | ervice shall constitute the agreemen<br>the exchange of the mutual promise<br>rovided by TE are for non-commerci<br>phone, fax, and e-mail entered abor<br>ohone calls, and/or leave voice mai<br>tion instructions received by TE fro | s of perform<br>al purposes o<br>ve by Client i<br>ls including | ance of e<br>only. Clier<br>n the sec<br>Client tra | ach party's<br>nt agrees to<br>tion Comn<br>ansaction i | s obligations giv<br>o only conduct<br>nunication are t<br>information via | ven hereto t<br>transaction<br>the designa<br>the design | o each otl<br>s of a non-<br>ted mean<br>ated mea | her;<br>-commer<br>s of com<br>ns of coi | rcial nat<br>munica<br>mmuni | ture.<br>tion betv<br>cation a | ween TE<br>nd here       | and Cl | lient. Clie<br>emnifies | ent herek<br>TE in so          | by gives TE co<br>consenting. | onsent to sen<br>Any commi | d E-mails,<br>unication, |

including transaction instructions received by TE from the telephone number(s), fax, or e-mail address provided by Client shall be considered to be authentic instructions from Client. If requested in advance for Client convenience TE may consent to periodic receipt of Client faxes from other non-designated fax numbers. Client is responsible for all communications made through the designated lines of communication. Client authorizes and indemnifies TE to accept without additional verification, instructions or documents transmitted to TE by fax or e-mail. Client consents to TE's right of sole authority of authentication of the Client signature on faxed or emailed instructions or documents, from which the client shall be absolutely bound and thereby so responsible.

3. For reasons of Client privacy and confidentiality, TE has the right to refuse to provide information about the Client to any third party. Therefore, TE may refuse to disclose to any unauthorized party unless the Client provides written consent and authorizing TE to do so.

4. TE may at its sole discretion make payments to Client by cash, account deposit, check, bank draft or electronic funds transfer. Bank draft(s), or check(s) shall be mailed or delivered to the above provided Client Address. Electronic fund transfer(s) and account deposit(s) shall be made according to the clients written instructions within provide Banking Details. Client is responsible for providing to TE and maintaining to TE the correct contact, address or banking details at all material times.

5. Client consents to TE's conduct of, including but not limited to, background or credit checks and all other such investigations or verifications as TE determines necessary in contemplation of the Client's instructed transactions or business as a whole.

6. The Client indemnifies and holds TE harmless and not liable from all claims related to the client's transactions or the client's relationship with TE, subject to, and only subject to, TE's clear responsibility for gross negligence.

7. There shall be no time limit for any transaction to be completed. TE reserves the right to delay or cancel any transaction at any time as commercial or banking circumstances may dictate.

8. Client shall not use the services of TE for any illegal purpose or purpose contrary to public policy as may be determined at TE's sole determination and discretion. Client agrees not to conduct any transactions that are related to, or could reasonably be taken to be related to, money laundering or terrorist activity of any kind whatsoever. Client agrees not to violate U.S. sanctions against Iran. Client shall not violate US Code Title 31 CFR part 560, or UN resolutions 1696, 1737, or 1747.

9. Client agrees not to conduct any transactions whatsoever on behalf of any third party. Client agrees to conduct transactions only for personal purposes and not for commercial gain.

10. TE may terminate this agreement without notice. Client agrees to any change or alteration upon reasonable notice. Client's consent to said changes or alterations in this agreement shall be deemed to have been given by the Client by the continued use of TE's services after said notice had been provided.

11. If any information furnished by Client under sections for Client Identity, Client Address, or Communication should change, the Client shall provide TE with written notification and shall re-submit this form with the updated information.

12. Client agrees to provide TE with identification documents and any other documents or verification instruments as may be requested by TE in support of this application form or TE's continued provision of service to the Client.

13. This agreement shall be known as the Terms of Service agreement. The parties agree that this agreement shall be construed and governed by the laws of Ontario. It shall constitute the agreement between the parties in its entirety and shall exclude all other representations or collateral agreements, whether written or oral, express or implied, from forming part of this agreement.

As aforementioned Client, I hereby confirm that all information in this form is true and correct, and that I have read and agreed to the Terms of Service.