

LAUNCH PLANNING CHECKLIST

Please send this to XO Limited, PO Box 8663, Symonds Street, Auckland. New Zealand.
Or Fax to +64 9 520 5125.

GENERAL INFORMATION

Terms and Conditions of Membership	Due Date: <u> / / </u>	Date Completed: <u> / / </u>
Privacy Policy	Due Date: <u> / / </u>	Date Completed: <u> / / </u>
Application Form	Due Date: <u> / / </u>	Date Completed: <u> / / </u>
Graphics Ready	Due Date: <u> / / </u>	Date Completed: <u> / / </u>
Website Translation Ready	Due Date: <u> / / </u>	Date Completed: <u> / / </u>
List of Staff Names	Due Date: <u> / / </u>	Date Completed: <u> / / </u>

PRICING PLANS

Charge	Plan 1	Plan 2	Plan 3	Plan 4
Joining Fee				
Monthly Fee				
Annual Fee				
Commission Buy				
Commission Sell				
SMS Transaction Charge				
Other :				
Other :				
Other :				

If you have more than 4 pricing plans please explain the reason for it here and submit a second form:

BROKER COMMISSION RATES

Broker commissions are expressed as a percentage of the money received by the exchange in fees. For example if an exchange charges \$10 on a transaction and the broker receives 10% of this value then he or she will receive \$1. The broker only receives these fees when the transaction is paid by the member of the barter exchange.

I will give the following commissions to my brokers:

	Barter % Buy	Barter % Sell	Cash % Buy	Cash % Sell
Broker				
Sub-Broker				
Agent				

AUTHORIZATION

I, _____ certify that the above information is true and correct and that any adjustments to these figures which cause a delay in our roll-out may cause penalty charges to be levied against my company. I agree to pay all of these penalty charges if the delay in setting pricing plans and supplying the aforementioned information required by XO is my fault.

Signed by _____ on this _____ day of _____ month, _____ (year)
(full name)

Signature

Witness