

[Company Letterhead]

[Date]

[Bank Name]

[Bank Address]

[City, State, Zip Code]

Dear Sir/Madam,

In connection with an audit of our financial statements, please provide directly to our auditors, [Auditor Name], at [Auditor Address], the following information regarding our Bankers Acceptance liabilities as of the close of business on [Audit Date].

Please provide details for each acceptance outstanding, including:

- Acceptance Number
- Date of Acceptance
- Maturity Date
- Face Amount
- Discount Rate / Interest Rate
- Collateral or Security held (if any)
- Names of any endorsers or guarantors

If there are no outstanding Bankers Acceptance liabilities at the aforementioned date, please state so below.

Please also indicate if there are any other direct or contingent liabilities to your bank not listed above.

Yours faithfully,

[Authorized Signature]

[Name and Title]

BANK RESPONSE:

The above information is: [] Correct [] Incorrect (see details below or attached)

Details/Exceptions:

Signature: _____ Date: _____

Title: _____ Bank: _____