**[Bank Name of Reimbursing Bank]**
[Bank Address]
[City, Country]

**Date:** [Insert Date]

**RE: Reimbursement Undertaking**

**Issuing Bank:** [Name of Issuing Bank]
**Letter of Credit Number:** [LC Number]
**LC Amount:** [Currency and Amount]
**Beneficiary:** [Name of Beneficiary]
**Claiming Bank:** [Name of Negotiating/Nominated Bank]

Dear Sir/Madam,

In accordance with the instructions received from [Name of Issuing Bank] dated [Date of Reimbursement Authorization], we hereby issue this irrevocable reimbursement undertaking in your favor.

We undertake to honor each complying claim presented by [Name of Claiming Bank] under the above-referenced Letter of Credit, up to a maximum aggregate amount of [Currency and Amount].

Our undertaking is subject to the following conditions:

1. Claims must be submitted to us via authenticated SWIFT (MT742) or by registered mail to our office at [Address].
2. Claims must certify that all terms and conditions of the Letter of Credit have been complied with.
3. This undertaking is valid until [Expiry Date].

This reimbursement undertaking is subject to the Uniform Rules for Bank-to-Bank Reimbursements under Documentary Credits (URR 725).

Yours faithfully,

[Authorized Signature]
[Name and Title of Signatory]
[Name of Reimbursing Bank]