

IRREVOCABLE LETTER OF CREDIT

Submitted to the State of Montana

DATE OF LETTER OF CREDIT

LETTER OF CREDIT NUMBER	CONTRACT NUMBER	AMOUNT (U.S. DOLLARS)	CONTRACT EXPIRATION DATE
CUSTOMER NAME AND ADDRESS	ISSUING FINANCIAL INSTITUTION NAME AND ADDRESS	BENEFICIARY NAME AND ADDRESS	

The purpose of this Irrevocable Letter of Credit is to create a primary obligation on the part of the Issuing Financial Institution to the State of Montana relating to the above-captioned matter.

Funds in an amount up to but not exceeding the amount noted above are available prior to the contract expiration date, plus 60 calendar days thereafter. The Issuing Financial Institution agrees to honor this Irrevocable Letter of Credit upon receipt of a properly dated and signed letter demanding payment. No other documentation or substantiation will be requested or required. The check for the amount requested will be transmitted within 10 days of the receipt of a letter as long as it is presented to the Issuing Financial Institution on or before the close of business within 60 calendar days of the contract expiration date.

This Irrevocable Letter of Credit shall be deemed automatically extended without amendment for one year from the contract expiration date, or any future expiration date, unless 60 days prior to any expiration date, the Issuing Financial Institution notifies the State of Montana that they elect not to consider this Letter of Credit renewed for any such additional period. Notice of nonrenewal will be sent to the State Procurement Bureau, Department of Administration, P.O. Box 200135, Helena, MT 59620-0135.

This Letter of Credit is subject to and governed by the International Chamber of Commerce Uniform Customs and Practice for Commercial Documentary Credits (2007 Revision) (UCP No. 600), the laws of the State of Montana (Mont Code Ann. §§ 30-5-101, *et seq.*), and Administrative Rule of Montana 2.5.502. In the event of any conflict, the laws of the State of Montana will control with venue in Lewis and Clark County.

Sincerely,

Printed Name

Authorized Signature – Issuing Financial Institution