

Thomas J. Sacerich

ATTORNEY AT LAW
8302 Yellowbrick Rd.
Mentor, OH 44060
Ph: (440) 974-8081 Fax: (440) 974-8123
TSacerich@aol.com

Dear Client,


You are being asked to sign an Attorney Agreement for the purpose of recovering your unclaimed funds. I will use this Agreement when I apply to the Court for the release of your funds. The purpose of the Attorney Agreement is to provide my office with authorization to enter an appearance in Court on your behalf and with your authority to take the necessary legal action.

Please understand that I do not intend to charge you for my services. I will be paid directly by Unclaimed Funds Locators from their portion of any recovery. I will not be sending you an invoice, and I will not be expecting any payment from you.

When your funds are recovered, you will receive as your share the total amount that was agreed to in your Finder's Agreement with Unclaimed Funds Locators. There will be no deductions for my fees.

Please keep this letter as your guarantee, and please feel free to call me if you have any questions. I will be calling you once I receive a signed copy of the Attorney Agreement from you.

Sincerely,



Thomas J. Sacerich

TJS:mas

ATTORNEY AGREEMENT

The undersigned Client agrees to retain Attorney Thomas J. Sacerich for the purpose of collecting certain unclaimed funds owed to Client. Further, Client authorizes said Attorney to enter an appearance in any lawsuit on Client's behalf, apply for, receive, endorse, deposit into escrow and disburse said unclaimed funds on behalf of Client.

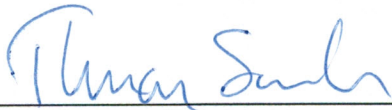
Attorney shall be paid by Unclaimed Funds Locators for representing Client in this matter. Client shall not be required to pay Attorney any advance retainer toward said fees. Client understands that Attorney will use his best efforts in recovering said funds for Client, but cannot guarantee success in all cases.

The provisions of this Agreement shall apply only to the matter referenced herein.

You have the right to terminate my services and representation upon written notice to me. I reserve the right to withdraw from representation if, among other things, you fail to honor the terms of this engagement letter, you fail to cooperate or follow my advice on a material matter, or if any fact or circumstance would, in my view, render my continuing representation unlawful or unethical. If you terminate the representation or I elect to withdraw, you will take all necessary steps to free Thomas J. Sacerich from any obligation to perform further, including the execution of any documents necessary to complete my withdrawal.

You understand by signing this agreement, you authorize Thomas J. Sacerich immediately to begin legal action on your behalf. If you are in agreement with the terms of this letter, please sign on the signature line below and return this letter to me at your earliest convenience. I look forward to working with you in this matter.

Dated: _____, 20__



Thomas J. Sacerich (Attorney)
8302 Yellowbrick Rd.
Mentor, OH 44060
Ph: (440) 974-8081

Client Signature
Printed Name: _____
Address: _____

Phone No.: () _____

Client Signature
Printed Name: _____
Address: _____

Phone No.: () _____