



INTEGRITY VERIFICATIONS, INC.

EMPLOYEE SCREENING · DRUG TESTING · FINGERPRINTING · POLYGRAPHS · LOSS PREVENTION

SERVICE AGREEMENT

CLIENT: _____

ADDRESS _____

TEL. NO: _____ FAX NO: _____ EMAIL: _____

AGREEMENT dated as of ____/____/____, between _____

_____ herein after called "client" having an office
at _____ and

INTEGRITY VERIFICATIONS (herein after called "IV").

1. "IV" shall furnish to "client" on request any or all of the services described below. Client agrees to supply information needed to conduct these services and at all times furnish information within the legal system guidelines. "IV" agrees to furnish results of all services within the legal system guidelines. Client also agrees to use all necessary forms to properly supply services (ie. request forms, release forms, employee information forms, etc.)

2. SERVICES REQUESTED

_____	Cost: \$ _____
_____	Cost: \$ _____
_____	Cost: \$ _____
_____	Cost: \$ _____

3. Client agrees to pay "IV" for the services described above at the above-mentioned rates plus all applicable sales, use and similar taxes.

4. Client agrees to utilize the services of "IV" for a period of one year from the date of this agreement at the above-mentioned costs.

5. Client agrees to use the services of "IV" until such time the relationship is terminated. Client agrees that upon termination they will provide "IV" with 30 days notice of termination.

In witness whereof, the parties by there duly authorized representatives have signed this agreement as of the date first written above.

(CLIENT'S NAME)

INTEGRITY VERIFICATIONS

By: _____

By: _____

TITLE

TITLE