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It is understood that **POA receives no compensation for its referrals.**

It is understood that POA does not accept any memberships from anyone other than home their legal representatives and **I am hereby representing that I am not a member of**

It is also understood that if more than two POA members have issued formal complaints to my services and POA has reason to believe those complaints are legitimate, I (or my company) taken off of the POA referral list until further notice. POA will extend me (or my company) opportunity to appeal the decision to halt referrals.

POA referrals are provided within a geographic area and the geographic region in which you must be provided.

The undersigned is duly authorized to enter into this pledge on behalf of the company name

ADVANCED MICROCLEAN

PRESIDENT

Company Name

10-20-06

Title

[Signature]

Date

Signature

Other:

1. Please provide a brief description of services performed:

MOULD REMEDIATION / PESTS ABATEMENT
DEHUMIDIFICATION - DRY-OUT

2. Territory Covered:

STATE OF FLA.

3. Telephone Number for POA Members To Call:

954-931-8154

4. Email Address:

MPEREZ - AMC @ YAHOO

5. Website (if applicable):

ADVANCED-MICROCLEAN.COM

6. Charge for Estimates (if applicable):

NO

7. Any Other Details:

AVAILABLE 24/7

Fax the filled out form and other information to: 888-648-8823.

Thank you.

Melinda Ballard, Policyholders of America

www.policyholdersofamerica.org