



ASSET SEARCHES  
FINANCIAL FRAUD  
JUDGMENT COLLECTIONS

California PI License No. 28286

**THE TRUTH**

**We look Forward TO Exceeding Your Expectations...**

This agreement is entered between the following Client (s) and the Firm:

Client Name:

Herein referred to as the "CLIENT"; do hereby retain and employ the above named firm; herein referred to as the "FIRM", as private investigators in order to assist me in a legal investigation and or cases that might arise, from any business or transactions conducted. The client shall not have the authority to make any binding representation or agreement on behalf of the firm. The client will not reveal or advice anyone that an investigation is being conducted, in order to ensure the safety of the investigators and preserve the quality of the investigation.

**CASE DESCRIPTION: Private investigative services**

ANY AND ALL FUTURE INVESTIGATIVE SERVICES AND LEGAL ISSUES WILL BE ADDRESSED IN WRITING, VIA EMAIL.

**PROFESSIONAL FEES**

The client understands and agrees that the professional fees will be a set at \$ 105.00 USD per hour plus any and all costs which will be accompanied by documentation. The minimum 3 hours plus \$.50 per mile. The client understands the firm fees, costs and expenses are non-refundable; regardless the outcome of the case.

The client and the firm agree on a retainer in the amount of \$ \_\_\_\_\_ to be paid at the execution of this agreement which will be utilized and an invoice will be issued and emailed to client. The client agrees to pay the firm immediately for any outstanding monies or funds due to the firm within 10 days. In the case the client makes a stop payment on a credit card payment or a check; than the firm will have the right to recover triple damages from the client.

**COMMUNICATION**

Any other or additional issues will be addressed in person or by a written request in English MJ@Nowpi.com. All communication and requests must be in writing via online at www.nowpi.com. If the client fails to communicate with the firm, than the firm has the right to cancel said agreement and demand immediate payment of all servicers rendered.

**WHO WORKS ON THE CASE**

The Firm has the right to bring in other professionals and lawyers to work on this case. Also, CLIENT gives the power for all professionals, private investigators, lawyers, law clerks, paralegals, legal assistants and interns who are now working for THE FIRM as employees, independent contractors or individuals who are hired in the future, to work on this case per the discretion of the firm.

**CLIENT AND FIRM RELATIONSHIP WITH CONFIDENTIALITY**

The CLIENT understands that the FIRMS main goal is to protect CLIENT's rights, assets and interests. Therefore, the client has been truthful and didn't lie to the firm. The FIRM has made No GUARANTEE, promise the success or outcome of any case. The client understands that lying or deceiving the firm, would endanger the private investigators and its agents. The client will hold the firm harmless from any damages or legal actions that might arise from the investigation of this case. In the event that the client lies to the firm, than the firm will have the right to withdraw from the case without notice and will not provide any reports or evidence. Furthermore, the firm will invoice the client for the entire investigation including costs and the client will pay for the firm's time, expenses and costs. The FIRM will recognize and abide by client confidentiality privilege as long as the CLIENT will do the same. Therefore, both parties agree that "Confidentiality" will survive, if this contract and agreement has been cancelled or revoked. Confidentiality will NOT survive ONLY in a case of dispute between the firm and the client.

**Jurisdiction**

Client agrees to hold the firm, representatives and its agents harmless from any and all damages, losses, costs and expenses including attorney fees, suffered or incurred in connection with or arising out of claims which are occasioned by any disclosure of any part of said reports. In Witness Whereof, the Parties set their hands on the date this is fore-mentioned above. This instrument (including any exhibits) contains the entire contract between the parties. This agreement shall be governed by and construed in accordance with the laws of Orange County, California. The prevailing party shall be entitled to court costs, private investigations fees and attorney's fees.

<b>Client Names</b> Please print clearly	<b>PLEASE INCLUDE A COPY OF YOUR IDENTIFICATION WITH THIS AGREEMENT</b>  Client Signature
Telephone Number: _____ CELL PHONE: _____ Email Address: _____	X  Date: _____ Address: _____ _____ _____

**Please Complete This Form and FAX with a copy of your ID to 1800-430-3887**

714-592-8000



Credit Card Authorization form  
Blue Systems International a Professional Investigation firm  
License: PI 28286

Please Complete This Form and FAX with copy of ID  
and credit card to 1800-430-3887

Client Name: \_\_\_\_\_ Authorizes **Blue Systems International** to charge my Credit Card:

Credit Card Number: \_\_\_\_\_

Circle one: **VISA**                      **MASTERCARD**                      **AMERICAN EXPRESS**                      **DISCOVER**

3 digit security code \_\_\_\_\_

Email Address: \_\_\_\_\_

Billing zip code \_\_\_\_\_

CELL PHONE NO. \_\_\_\_\_

Expiration Date \_\_\_\_ \_\_\_\_ \_\_\_\_ (Please notify Blue Systems International of new expiration date)

**For Your convenience, Blue Systems International offers the following options for paying Retainers and invoices. Please check the appropriate option below:**

**Private Investigation services**

**OPTION 1**                       I hereby authorize Blue Systems International to bill the above card for the full Charges, as listed on my retainer. \$ \_\_\_\_\_

**OR**

**OPTION 2**                       I hereby authorize Blue Systems International to bill the above card for the following amount as listed on my invoice: \$ \_\_\_\_\_

The client understands that the FIRM is unable to make any guarantees or promise the success or outcome of any case. The charges on the credit card are non-refundable per agreement.

Name of Individual whose name appears on the Credit Card: \_\_\_\_\_

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, and ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ today's Date: \_\_\_\_\_

**Please Complete This Form and FAX to Blue Systems International: 1800-430-3887**

**For Blue Systems International use only:**

Charge Processed                      Approval # \_\_\_\_\_                      Authorization Only Approval # \_\_\_\_\_

References # \_\_\_\_\_                      References# \_\_\_\_\_

Batch # \_\_\_\_\_                      Batch # \_\_\_\_\_