

APPENDIX I

Request for Privacy Information

Natural Client

I, the undersigned, Mr/Ms.	Date of E	Date of Birth, holder of a	
number	with residential address: _	hereby request	in writing the following:
	insferred to	-	
By signing this declaration, I release the Company and/or its managers and/or shareholders from all duties to me and I warrant that I will indemnify and hold Company's from any direct loss or harm,			
including, without limitation, reasonable attorneys' fees, in connection with any breach or enforcement of			
my obligations hereunder, with consideration to the information.			
Triy obligations horoanaci,	With consideration to the in	morriation.	
I will keep all information and/or terms and/or information given by the Company strictly confidential and under no circumstances inform any third party and/or client either currently or in the past of the fees paid to me by the Company.			
I shall further refrain from any defamatory, libellous or otherwise expressing negatively or adversely against the Company. In any case in which the Company shall find any such actions made by me or by a third party on my behalf, I shall be required to pay the Company an amount of no less than 50,000 USD without the Company required to show any proof of damages made to it for my actions.			
I shall be personally liable to party on my behalf.	for any breach of the aforer	nentioned which was ma	ade by me and/or by a third
Client's Name:		_	