PAYMENT DIRECTIVE

Your Designated Payee (Optional)

(If inapplicable, write "NONE" in each blank space)

I hereby instruct Shrader Law, PLLC, (the "Payor") to remit and distribute a75% portion of any settlement proceeds to which I am entitled to Active CS LLC. Further, I herebyagree to defend, indemnify, and hold harmless the Payor from and against any and alllosses, costs, liabilities, claims, or damages related to the Payor's compliance withthese payment instruction.

Accepted and agreed to:

Date: January 29, 2021

Client Signature:

Printed Name: test holly last fuck

SS #: 12

D.O.B.: Jun 6, 1995