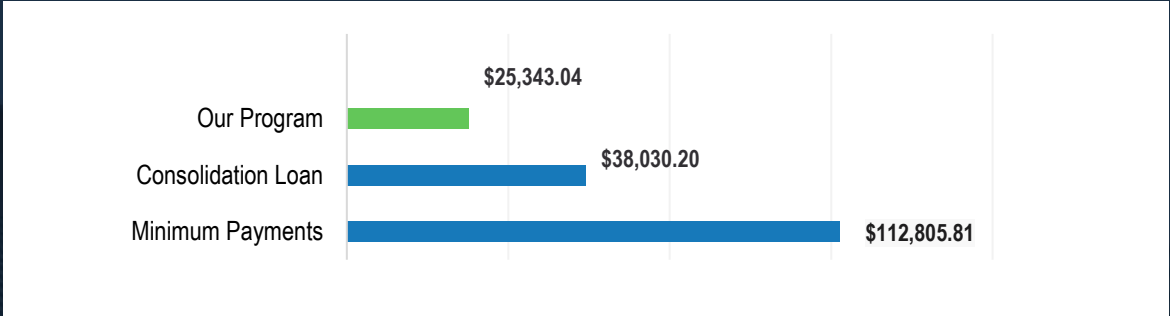




Debt Resolution Retainer Agreement

Estimated* Debt Resolution Comparison



Total Enrolled Debt:

\$29,254.00

Bi-Weekly Deposit:

\$243.68

Estimated Program Deposit:

\$25,343.04

PREPARED FOR:

Rauf Giwa

12/02/2024

*Estimates are based on our past experience with creditors. Actual results may vary on a case-by-case basis. In addition, the estimates are dependent on the accuracy and completeness of information received from clients and applicable third parties, and on your ability to save a consistent amount each month based on the program. We do not guarantee that your debts will be resolved for a specific amount or percentage or within a specific period of time. We do not assume your debts, make monthly payments to creditors or provide tax, bankruptcy, or accounting advice or provide credit repair services. Our service is not available in all states and our fees may vary from state to state. Please contact a tax professional to discuss potential tax consequences of less than full balance debt resolution. Read and understand all program materials prior to enrollment, including for example, potential impact on credit rating.



Dear Rauf Giwa ,

It is a pleasure to welcome you to Five Lakes Law Group PLLC!

We are pleased you have chosen our services. By way of introduction, our law firm provides consumer debt assistance focused on helping people like you resolve unsecured debt obligations with creditors and debt collectors.

We are not a bankruptcy law firm. Instead, we seek bankruptcy alternatives through evaluation, and debt negotiation that helps our clients repay their debts and take control of their financial future. We use the laws of your state, vigorous negotiations, and our relationships with creditors to get you a fair deal. To provide you with the most cost-effective representation, we are not a "full service" law firm. Please carefully review the services provided in the enclosed Retainer Agreement to understand what services we provide.

Our representation requires a commitment from you. Please make sure to read and understand what is required of you in the enclosed Retainer Agreement. Our representation of you will only begin after we process a conflict check and after one of our attorneys reviews your file to determine that debt resolution services are appropriate for your financial situation. Once your file is approved, we will notify you of the approval and send you a copy of the final program documents.

We appreciate your timely completion and return of the enclosed documents. Upon receipt, we will review and contact you if we need more information. We may communicate with you using email, so please check your email account regularly and respond immediately to any requests.

If you have not yet spoken to your attorney personally, please contact our office to schedule your initial consultation.

Sincerely,

Five Lakes Law Group PLLC

Five Lakes Law Group PLLC

PO Box 8280

Philadelphia, PA 19104-8280

T: (855) 441-6129

F: (888) 584-1135

Your Attorney: Kristina Pierce (Five Lakes)



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RETAINER AGREEMENT

1. PARTIES. This Retainer Agreement (“Retainer Agreement” or “Agreement”) is entered into between Five Lakes Law Group PLLC (“FLLG”) and Rauf Giwa (“Client” or “Clients” or “Your” or “You”) (together, the “Parties”) for the purpose of resolving Client’s unsecured debt and other legal representation as described herein. This Agreement shall become effective after (i) FLLG determines Client qualifies as an acceptable candidate for FLLG’s program, (ii) all Parties sign this Retainer Agreement, and (iii) FLLG’s conflict check is cleared. FLLG’s agents, employees, subcontractors, partners, of-counsels, and associates are all included in and considered “FLLG” for purposes of this Agreement. “FLLG Attorney” means an attorney or attorneys associated with FLLG. “Client” includes the client and co-client, if applicable.

2. SUBJECT MATTER. Client is retaining FLLG to resolve debts owed by Client(s) to Creditors. Client(s) will provide a list (“Creditors List”) of unsecured debts (“Enrolled Debts”) that will be the subject matter of this Agreement. Services provided by FLLG are limited to the purpose described herein and limited only to the Enrolled Debts. Services will only be expanded should Client(s) and FLLG agree through a separate writing.

3. LEGAL SERVICES. The following Legal Services may be provided on your behalf (i) by an FLLG Attorney who is licensed to practice law in the State of South Carolina or (ii) by an attorney or paralegal who is under the supervision of an FLLG Attorney who is licensed to practice law in the State of South Carolina:

- Consultation concerning Client’s options and viability of debt resolution.
- Locate creditors and debt collectors reporting debts owed by Client(s).
- Perform and supervise negotiations with creditors listed on the Creditors list, including supervision of the work of non-attorney staff and approving resulting resolution offers or payment arrangements.
- Determine the validity of Enrolled Debts (if necessary).
- Debt resolution negotiations for the Enrolled Debts.
- Debt resolution negotiations resulting from post-enrollment lawsuit(s) filed against Client(s) for the Enrolled Debts, if any.
 NOTE: Any negotiation with opposing parties or their counsel on substantive issues involved in litigation will only be conducted by an FLLG Attorney licensed to practice in the State of South Carolina.
- Assistance with setting up and monitoring payments to creditors through Client’s payment processor.
- Assist Client(s) in maintaining an accurate budget and updated hardship information.
- Advise, appear for, and defend Client(s) through final hearing or trial in the event a lawsuit is filed on an enrolled debt post-enrollment. Lawsuit representation is limited in scope to those services contained herein and does not include appeals or post-judgment assistance.
- Advise on the availability of claims under the Fair Debt Collection Practices Act (“FDCPA”), as necessary (Note: while FLLG may use the availability of a FDCPA claim in negotiations with a creditor or collector, the Legal Services do not include representation in pursuing such claims in court).

Client acknowledges that FLLG may engage a third-party to provide certain legal or administrative support services under the supervision of FLLG related to this Agreement, including, but not limited to, consultations with Client about enrolled debts, discussions with creditors about enrolled debts, assistance in managing Clients’ resolution offer payments, etc. By the Client’s signature below, Client consents for FLLG to outsource the performance of any legal services to any licensed lawyer and any support services to any licensed lawyer or nonlawyer under FLLG’s supervision.

4. BUDGET. FLLG will collect financial information from Client to create a personal budget. This budget is based on Client household income and expenses. Incorrect information may hinder the debt resolution process. Client agrees to immediately notify FLLG of any financial changes that occurs after this Agreement is signed. Client represents and warrants that Client is in a state of financial hardship, Client is unable to continue paying Client’s creditors without severe financial hardship, and that Client verifies the truth and accuracy of all financial information provided to FLLG. FLLG is under no obligation to independently verify Client’s financial and hardship information.

5. ENROLLED DEBTS/CREDITORS LIST. Client will provide FLLG with a list of debts (“Enrolled Debts”) and a list of creditors (“Creditors List”) to which such debts are owed as shown in Exhibit A. Only Enrolled Debts are included in this Agreement. Client may make additions or deletions to this list and the terms of this Agreement will govern the added debts. FLLG will attempt to negotiate and resolve the Enrolled Debts when Client has sufficient funds to make payments towards any resulting resolution offers. Any additions and/or deletions to the Creditors List will be reflected in Client’s fees and monthly savings plan. Resolution offers or payment arrangements for all debts must also be approved by Client’s Creditors to be effective.

6. AUTHORIZATION TO OBTAIN FINANCIAL INFORMATION. Client authorizes FLLG to obtain financial information, including Client’s credit report(s), and information from any creditor on the Creditors List for the purposes of advancing this Agreement.



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Client agrees to notify FLLG of all creditor correspondence and provide FLLG with copies of correspondence that FLLG deems necessary to resolve Client's Enrolled Debts.

7. GENERAL RESPONSIBILITIES OF CLIENT(S). Client agrees to make all payments as set forth herein, to not incur additional debt during this Agreement, to immediately forward correspondence from creditors on the Creditors List to FLLG, and to immediately notify FLLG of legal action by creditors on the Creditors List.

Client agrees not to negotiate personally with creditors on the Creditors List unless instructed by FLLG and to not file for bankruptcy without notifying FLLG prior to such filing. Client understands that making all payments on schedule according to this Agreement is important to the success of Client's program. Failure to make scheduled payments may result in the loss of structured resolution offers, additional costs like late fees, higher interest rates, and may result in the loss of the benefit secured from a resolution offer. Client agrees to notify FLLG at least three (3) business days prior to any payment being due if Client believes they will be unable to make the scheduled payment. FLLG reserves the right to cancel this Agreement if Client misses two (2) or more payments in any six (6) month period.

In the event you have enrolled jointly held accounts or credit cards, or loans with co-borrowers, or any other such debts that may additionally be the legal responsibility of third-parties who are not a party to this Agreement ("Joint Debts"), you acknowledge and agree that FLLG shall have no liability for any claims arising as a result of enrolling such Joint Debts. Furthermore, you understand it is a best practice to notify such third-parties that you've enrolled the Joint Debts in this program as well as any effect that may occur to such Joint Debts and/or the third-party's credit. You agree that any obligation to notify a third-party regarding Joint Debts is solely yours.

Initials: Client:

RG

Co-client:

Difficult Creditors. Some creditors may not agree to negotiate all debts and there is no guarantee that your creditors will agree to resolve your debts. FLLG cannot compel creditors to negotiate. Client's involvement may be required to obtain a resolution offer with some or all of Client's creditors. Client may be required to participate in a call with FLLG and Client's creditor(s) or make a call to Client's creditor(s) with FLLG's assistance to advance a resolution offer or provide verbal consent. If you are asked to negotiate with a creditor, you are not required to do so, and you may ask us to either 1) continue to resolve your debts with your assistance or 2) withdraw the debt from the program without charge or penalty before the debt is resolved.

8. FEES. We will not charge you a retainer fee until we reach a resolution offer for one or more of your debts. Client authorizes FLLG to receive funds from Client's third-party savings account to pay its fees pursuant to this Agreement. Client owns and controls Client's account and may withdraw funds at any time without penalty. In consideration for the services being provided, Client agrees to make the following payments:

Retainer Fee: A flat fee of **\$8,375.58** equaling **27.00%** of enrolled debt(s), based on debt amount at enrollment and subject to verification. This fee is earned by FLLG upon successfully reaching a resolution offer for of a debt and first payment upon such offer, or the otherwise successful resolution of the Enrolled Debt (e.g., cancellation of debt, successful dispute). If Client has multiple Enrolled Debts, the fee collected for each resolution offer shall bear the same proportionate relationship to the total fee negotiating the entire debt balance as the individual debt amount bears to the entire debt amount at the time of enrollment. Refer to Schedule A for the fee and deposit schedule.

If FLLG outsources any legal or support services related to this Agreement, then FLLG shall be responsible for any expenses or costs associated with the services provided by any such lawyer or nonlawyer.

9. TIMING FOR RESOLUTION OF DEBT. The timing to reaching a resolution offer can vary greatly. The time required depends on many factors including the balance of the debt, the amount of time the debt was owed, Client's available funds and Creditors' willingness to engage in negotiations. FLLG does not and cannot guarantee a particular result and cannot guarantee that Client's debts will be resolved within a defined timeframe. If Client fails to save sufficient funds, FLLG will not be able to negotiate and/or resolve Client's debts. FLLG may extend Client's estimated program length to complete the debt resolution process and payment of all accounts. Typically, FLLG will make a good faith attempt to resolve a debt when Client has accumulated approximately 40% of the current balance, which typically occurs between 3-6 months into the program. Individual circumstances will vary. FLLG shall obtain Client's approval for resolution offers upon receiving said offers on enrolled debts. All resolution offers must be approved by Client in order to be effective.

10. CREDIT REPORTING. FLLG does not report to credit bureaus, but Client's creditors may. FLLG has no control over creditors and makes no assertions that FLLG can prevent creditors from reporting negative information to the credit reporting agencies.

Failure to make timely payment to creditors will likely result in a reduction to Client's creditworthiness. FLLG is not a credit repair company or credit services organization and does not provide credit advice.



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11. RISKS OF DEBT RESOLUTION. Debt resolution is an aggressive approach to resolving debt. No payments are made to Client's creditors until a resolution offer is in place. **FLLG cannot prevent creditors from taking legal action, including lawsuits, against Client, and FLLG cannot prevent an increase in collection activity. Client's Enrolled Debts will increase because creditors will add interest and late fees during this program due to nonpayment.**

12. TAX IMPLICATIONS. If a debt is resolved for a difference greater than \$600.00, the savings may be reported to the Internal Revenue Service as income and may be taxable. FLLG cannot control how creditors report a discharge of indebtedness. For more information, contact a tax professional. FLLG does not provide tax advice.

13. CORRESPONDENCE. Correspondence between Client and FLLG may be via email, fax, mail, text, telephone, or voicemail unless Client notifies FLLG in writing that one or more of these methods should not be used, in which case the other methods may continue to be used. Standard data fees and text messaging rates may apply. You may opt out of text delivery any time by responding with STOP or by contacting our offices. Your consent is not a condition of receiving services.

14. GOVERNING LAW/ ARBITRATION & DISPUTES. Client is encouraged to review this mandatory, binding arbitration with Client's own independent legal counsel prior to signing this Agreement. This section changes how Client and FLLG may pursue or protect themselves in the event of a dispute and limits the parties' rights, keeping them out of the court. Read and review carefully. If you do not agree with or understand this section, do not sign this Agreement. Where prohibited by the Rules of Professional Responsibility for attorneys in your state, this section may not apply in some circumstances or may be limited to not include claims for malpractice. However, even if non-binding, the parties may pursue arbitration by mutual consent.

In the event of any controversy, claim or dispute between the Parties arising out of or relating to this Agreement or the breach, termination, enforcement, interpretation, unconscionability or validity thereof, including the termination of the scope or applicability of this Agreement to arbitrate, the parties agree it shall be determined by arbitration in the county in which the consumer resides. The Parties agree, the arbitration shall be administered by JAMS Alternative Dispute Resolution ("JAMS") pursuant to its rules and procedures and an arbitrator shall be selected by JAMS. The arbitrator shall be neutral and independent and shall comply with the JAMS code of ethics. The award rendered by the arbitrator shall be final and shall not be subject to vacation or modification. Judgment on the award made by the arbitrator may be entered in any court having jurisdiction over the Parties. If either Party fails to comply with the arbitrator's award, the injured Party may petition the court for enforcement. The Parties agree that either Party may bring claims against the other only in their or its individual capacity and not as a Plaintiff or class member in any purported class or representative proceeding. Further, the Parties agree that the arbitrator may not consolidate proceedings of more than one person's claims and may not otherwise preside over any form of representative or class proceeding. The Parties shall share the cost of arbitration, including attorneys' fees, equally. If the client's share of the cost (not attorneys' fees) is greater than \$2,500.00 (Two-thousand Five Hundred dollars), FLLG will pay the consumers share of costs (not fees) above that amount. In the event a Party fails to proceed with arbitration, unsuccessfully challenges the arbitrator's award, or fails to comply with the arbitrator's award, the other Party is entitled to costs of suit, including reasonable attorney's fee for having to compel arbitration or defend or enforce the award. This Arbitration Agreement is made pursuant to and governed by the Federal Arbitration Act, 9 U.S.C. Sections 1-16. Nothing in this Agreement shall be construed to prevent either party's use of bankruptcy or repossession, replevin, judicial foreclosure or any other prejudgment or provisional remedy relating to any collateral, security or property interests for contractual debts now or hereafter owed by either party to the other under this Agreement. Further, this Arbitration provision shall prevent any and all class wide actions. Arbitration shall proceed solely on an individual basis without the right for any Claims to be arbitrated on a class action basis or on bases involving claims brought in a purported representative capacity on behalf of others. The arbitrator's authority to resolve and make written awards is limited to Claims between you and us alone. Claims may not be joined or consolidated unless agreed to in writing by all parties. No arbitration award or decision will have any preclusive effect as to issues or claims in any dispute with anyone who is not a named party to the arbitration. A judgment of any circuit court may be rendered upon the award.

Binding Arbitration means both Parties give up the right to trial by a judge and/or jury. It also means both Parties give up the right to appeal from the arbitrator's ruling except for a narrow range of issues, unlike in a court of law where a court's ruling may be appealed in nearly all circumstances. The arbitrator's ruling will be final. It also means that discovery, which is the process where parties exchange information, may be severely limited by the arbitrator. Where discovery is limited, there is less opportunity to gather information. Simplified rules of evidence and procedure are in effect in an arbitration forum, making it less complicated and more efficient than litigation. Disputes are typically resolved sooner through arbitration than with litigation. Unlike in a court of law where proceedings and rulings are public, the documents filed and outcome of arbitration are private and confidential.

This section and arbitration requirement shall survive any termination.

15. ELECTRONIC SIGNATURE DISCLOSURE. By retaining FLLG, Client consents to receive, in electronic format, all information, copies of Agreements, and correspondence and to also send information in an electronic format. FLLG may provide all disclosures, periodic statements, notices, receipts, modifications, amendments, and other transactions electronically.



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 Your Attorney: Kristina Pierce (Five Lakes)

Electronic communications are deemed valid and authentic, and Client intends and agrees that electronic communications will be given the same legal effect as written and signed paper. Client has a right to receive a paper copy of electronic records. Client's consent may be withdrawn upon FLLG's receipt of such withdrawal. Withdrawal of consent may slow the speed at which FLLG can complete certain transactions with you or deliver services to you. To inform us that you either withdraw your consent to receive future notices and disclosures in electronic format, would like to receive paper copies, or to update your information you may: e-mail: clientsuccess@fivelakeslawgroup.com; call: (855) 441-6129; or mail: PO Box 8280 Philadelphia, PA 19104-8280. ATTN: Five Lakes Law Group, PLLC.

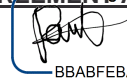
16. NO GUARANTEE. FLLG is unable to guarantee that it will be able to resolve any or all debts owed by Client or that debts will be resolved in a particular timeframe. Although we cannot guarantee success or a particular result, we promise to utilize our best efforts to perform the services described above. FLLG will make good faith estimates to Client based on FLLG's experience from past performance, but Client understands that each situation is different or may change.

17. TERMINATION. Either party may terminate this Agreement any time, at which time Client will be returned all funds held in Client's third-party savings account, less fees earned by FLLG. FLLG has no control over any banking fees or third-party service fees authorized by Client. There is no penalty for terminating. Client may terminate this Agreement by contacting FLLG at (855) 441-6129 or by submitting the Notice of Cancellation to FLLG.

18. ASSIGNMENT. FLLG may assign this Agreement and/or any portion of its rights under this Agreement to a third party. If FLLG sells, transfers, or assigns your account to another entity, it will provide you with written notice of the change and you may elect to cancel with no penalty.

19. ENTIRE AGREEMENT. This Agreement, along with any exhibits, schedules, and amendments, encompasses the entire Agreement of the parties, and supersedes all previous understandings and Agreements between the Parties, whether oral or written. Client agrees that no oral promises were made that are not contained in this Agreement.

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND AGREE TO ITS TERMS. I HAVE RECEIVED A COPY OF THIS AGREEMENT AND ITS ATTACHMENTS FOR MY RECORDS.


 BBABFEBAD92F40E...

12/02/2024

Client Signature

Date Signed

Co-Client Signature

Date Signed

FIVE LAKES LAW GROUP, PLLC


Attorney Signature

Date Signed

Printed Name: Kristina Pierce (Five Lakes)

Title: Primary Attorney

I permit FLLG to share my personally identifiable information, bank information and details regarding my program status under the Agreement with its third-party lending partners for the purpose of assessing my eligibility for loans and other financial products and services. I understand that certain information shared by FLLG with its lending partners may be protected from disclosure by the attorney-client privilege and that authorizing FLLG to share such information may constitute a waiver of this privilege. I understand I may opt out of sharing this information by following the instructions in the attached Privacy Notice.

Initial: 

NOTICE: This Retainer Agreement must be reviewed and approved by an FLLG Attorney before it is a binding agreement. Therefore, you are not a client of FLLG until your attorney approves your file for debt resolution services and accepts you as a client. The attorney-client relationship will begin when this Retainer Agreement is signed by both you and your attorney. You will be notified immediately upon FLLG's acceptance of you as a client.



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PRIVACY NOTICE

FACTS	WHAT DOES FIVE LAKES LAW GROUP, PLLC ("Five Lakes Law Group") DO WITH YOUR PERSONAL INFORMATION?
Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
What?	The types of personal information we collect and share depend on the product or service you have with us. This information can include: <ul style="list-style-type: none"> ▪ Social Security number and income ▪ Account balances and credit history Credit card or other debt and transaction or loss history
How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons Five Lakes Law Group chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Five Lakes Law Group share?	Can you limit this sharing?
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes— to offer our products and services to you	Yes	No
For joint marketing with other financial companies	Yes	No
For our affiliates' everyday business purposes— information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes— information about your creditworthiness	Yes	Yes
For our affiliates to market to you	Yes	Yes
For nonaffiliates to market to you	Yes	Yes

Questions?	Call: (855) 441-6129 or go to: fivelakeslawgroup.com
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Who we are	
Who is providing this notice?	Five Lakes Law Group, PLLC



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 Your Attorney: Kristina Pierce (Five Lakes)

What we do	
How does Five Lakes Law Group collect my personal information?	<p>We collect your personal information, for example, when you</p> <ul style="list-style-type: none"> • Open an account or give us your income information • provide account information or give us your contact information • show your government-issued ID
How does Five Lakes Law Group collect my personal information?	<p>We collect your personal information, for example, when you</p> <ul style="list-style-type: none"> • Open an account or give us your income information • provide account information or give us your contact information • show your government-issued ID
Why can't I limit all sharing?	<p>Federal law gives you the right to limit only</p> <ul style="list-style-type: none"> • sharing for affiliates' everyday business purposes—information about your creditworthiness • affiliates from using your information to market to you • sharing for nonaffiliates to market to you <p>State laws and individual companies may give you additional rights to limit sharing.</p>

Definitions	
Affiliates	<p>Companies related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • <i>Our affiliates include companies that have common corporate ownership with Five Lakes Law Group.</i>
Nonaffiliates	<p>Companies not related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> • <i>Non-affiliates we share with can include direct marketing companies, debt resolution companies, and lending companies.</i>
Joint marketing	<p>A formal agreement between nonaffiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> • <i>Our joint marketing partners include financial institutions, such as banks, marketers, and lending companies.</i>



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SCHEDULE A - LIST OF CREDITORS AND DEBT & PROGRAM DETAILS
Creditor List

Client Name	Rauf Giwa	Co-Client Name	
Client Email	giwa.raufolatunde@gmail.com	Co-Client Email	
Client Phone	281-250-6596	Co-Client Phone	

Current Creditor	Original Creditor	Account Number	Balance Owed
AMEX	AMEX	-3499926496752103	\$8,864.00
DISCOVER	DISCOVER	601100220467	\$8,724.00
CITI	CITI	546616046411	\$5,792.00
JPMCB CARD	JPMCB CARD	426684158736	\$5,489.00
JPMCB CARD	JPMCB CARD	426684178374	\$385.00
Total Enrolled Program Debt (at the time of enrollment)		\$29,254.00	

Client understands some of the enrolled accounts listed on this Schedule A, are conditionally enrolled into the Program and are subject to Company's final review and approval following Client's submission of all relevant creditor documentation as may be required by Company. Within thirty (30) days after your execution of this Agreement, Company may, in its sole discretion, require removal of any enrolled accounts where Client has failed to provide sufficient creditor documentation. Client and Company may agree to add or remove additional creditor accounts during the Program and adjust Client's Program accordingly.+

FLLG reviewed the foregoing debts and determined they qualify for the program. If any creditor on the list above ceases to work with us, we will notify you as soon as practicable. Please advise us immediately if any information changes.

Debt Resolution Plan Program Summary		
Program Debt Enrolled: \$29,254.00	Estimated Program Length (Months): 48	Bi-Weekly Program Deposit (all fees included): \$243.68
Estimated Debt Resolution Amount: \$16,967.32	Estimated Total Program Fees: \$8,375.58	Estimated Total Program Deposits: \$25,343.04
Estimated Program Savings: \$9,025.10	Fees, <i>(estimated on an annual basis)</i> : 6.75% of enrolled debt per year	Fee Percentage Amount: 27.00%
First Draft (Date & Amount): 12/06/2024 \$243.68		

The estimates on this form are based on our experience dealing with creditors – actual results vary on a case-by-case basis. In addition, accuracy of estimates is dependent on accuracy of information that we receive from you, and on your ability to save a consistent amount of money each month.



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Your Attorney: Kristina Pierce (Five Lakes)

NOTICE OF CANCELLATION

You may cancel this contract without penalty or obligation for any reason at any time by giving ten days' written notice of rescission to the licensee. Once your services are canceled, you are entitled to a refund of all unexpended funds you have paid to the credit counseling organization.

Date: 12/02/2024

To cancel this transaction, mail or deliver a signed and dated copy of this Cancellation Notice or any other written notice, or send a telegram, to Five Lakes Law Group PLLC, at PO Box 8280 Philadelphia, PA 19104-8280 NOT LATER THAN MIDNIGHT OF 12/13/2024.

I HEREBY CANCEL THIS TRANSACTION.

Date: _____

Buyer's Signature



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PO Box 8280
Philadelphia, PA 19104-8280
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F: (888) 584-1135
Your Attorney: Kristina Pierce (Five Lakes)

NOTICE OF CANCELLATION

2nd Copy—Keep for your records.

You may cancel this contract without penalty or obligation for any reason at any time by giving ten days' written notice of rescission to the licensee. Once your services are canceled, you are entitled to a refund of all unexpended funds you have paid to the credit counseling organization.

Date: 12/02/2024

To cancel this transaction, mail or deliver a signed and dated copy of this Cancellation Notice or any other written notice, or send a telegram, to Five Lakes Law Group PLLC, at PO Box 8280 Philadelphia, PA 19104-8280 NOT LATER THAN MIDNIGHT OF 12/13/2024.

I HEREBY CANCEL THIS TRANSACTION.

Date: _____

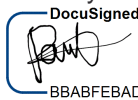
Buyer's Signature



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 Your Attorney: Kristina Pierce (Five Lakes)

GENERAL DISCLOSURES

1. The outcome of each case may vary. FLLG does not guarantee a specific outcome. To the extent that FLLG provides estimates, such estimates are based solely on FLLG's past performance and your results may vary.
2. FLLG does not provide credit repair services, financial planning, or tax services.
3. This is not a loan or debt consolidation. FLLG does not make payments to creditors and creditors are not paid until a resolution offer or payment arrangement is reached.
4. Your participation in the program may result in your being sued by creditors or debt collectors.
5. FLLG is not a full-service law firm and its scope of services is limited to the services described herein. Although FLLG represents you in court in defense of enrolled debts, it does not provide post-judgment representation or appellate practice.
6. Discharge of Indebtedness may be considered taxable income and amounts of \$600.00 or more may be reported to the Internal Revenue Service. Contact your tax professional for more information.
7. The amount you owe may increase since you will continue to incur late fees, interest and other penalties on your debts until they are resolved or otherwise paid.
8. Your creditworthiness will likely be negatively affected when your accounts go delinquent. FLLG does not provide credit repair services and is not a credit repair organization.
9. FLLG will only attempt to resolve your Enrolled Debts to creditors on your Creditors List, or their successors or assigns. If you have other debt(s), FLLG will not resolve such debt unless such debt(s) are added pursuant to this Agreement.
10. You must make all payments to your creditors as agreed upon in any resolution offer or payment arrangement. If you cancel our services, you must make arrangements with your third-party payment processor to continue to assist you since we will notify them that you have canceled our services and they will most likely also cancel your account and return any accumulated funds to you, less any earned bank fees or fees earned by FLLG. If that happens, you will need to make other arrangements to continue making payments on any resolution offers we previously negotiated for you or you will lose the benefit of those offers.
11. FLLG does not own or control your third-party savings account. All funds in the account are under your control and you may withdraw funds without penalty. If you cancel our services, all funds will be returned to you, less any earned bank fees or fees earned by FLLG. Please contact your payment processor for more information.
12. Any call placed with FLLG may be recorded or monitored. You agree that FLLG is not required to disclose this fact in every telephone communication with you.
13. You can review our Privacy Policy by visiting <https://fivelakeslawgroup.com/privacy-policy>. Your confidential information is important to us. However, we may be required to share your information in certain circumstances to best serve you. Please review the Privacy Policy for more information.

DocuSigned by:

 BBABFEBAD92F40E...

12/02/2024

 Client Signature

 Date Signed

 Co-Client Signature

 Date Signed



ACCOUNT AGREEMENT

Primary Applicant: Last Name	First Name	M.I.	Social Security #	Date of Birth (mm/dd/yyyy)
Giwa	Rauf		374-49-7857	05/16/1984
Co-Applicant (optional): Last Name	First Name	M.I.	Social Security #	Date of Birth (mm/dd/yyyy)
Authorized Contact (optional): Last	First Name	M.I.	Social Security #	Date of Birth (mm/dd/yyyy)
Beneficiary (optional): Last Name	First Name	M.I.	Social Security #	Date of Birth (mm/dd/yyyy)
Street Address (physical address, no PO Box)		City	State	Zip
2263 Durand Rd		Fort Mill	SC	29715
Home Phone	E-mail address			
281-250-6596	giwa.raufofatunde@gmail.com			
Debt Resolution Provider			Debt Resolution Provider Reference Number	
Five Lakes Law Group				

Finxera and the CFTPay Platform are the technology services (collectively, "Finxera Services") used to administer a transactional deposit account ("Special Purpose Account," hereinafter "SPA," as further described below) for your resolution activity. The CFTPay Platform will be provided by Finxera, Inc. and/or a federally insured depository institution (collectively "Finxera", "we," "our," "ours," or "us"). "You" or "yours" used in this agreement mean Primary Applicant and Co-Applicant, if applicable. "Authorized Contact" has the meaning set forth in Paragraph 6 of the Additional Terms and Conditions. "Beneficiary" means a person you have designated to receive your assets, if any, after your death. You hereby acknowledge that, subject to the limitations set forth in the FDIC regulations, deposits held in the SPA are eligible for FDIC pass-through insurance up to \$250,000, the federal deposit insurance limit, per depositor for each ownership category. See www.Finxera.com/licensing. The Finxera Services include customer support to help you manage your SPA. This confirms that the Debt Resolution Provider identified above ("DRP") does not own, control, or have any affiliation with Finxera. By signing below, you ask that Finxera and its successors provide you with the Finxera Services described below.

SPA. You ask that a SPA be established for your benefit. The SPA will be used for the accumulation of funds to (i) repay your debts in accordance with your instructions and the debt resolution plan that you have made with your DRP, (ii) pay any fees due in accordance with your instructions and the separate contract executed between yourself and your DRP ("DRP Agreement"), and (iii) pay for other services related to your debt resolution plan, and (iv) pay any fees due to Finxera pursuant to the terms of this Account Agreement as amended. You agree that you alone shall control and direct the funds in your SPA. You designate your DRP as your agent to transmit your instructions for funds transfer and disbursements to Finxera, and you authorize us to act upon the instructions provided by your DRP, without inquiry, as though such instructions came directly from you.

If the SPA has both a Primary Applicant and a Co-Applicant, each of you shall be obligated under this Agreement jointly and severally. You agree that each of you is authorized to transact any business on behalf of the SPA as fully and completely as if each of you were the sole owner of the SPA. We may accept instructions, written or oral, with respect to the SPA from either of you, without notice to the other, for the receipt, transfer, and withdrawal of funds by check, wire transfer or otherwise, including, but not limited to, checks drawn to, or transfers made directly to the one of you requesting the checks or to third parties. We reserve the right at any time to require joint written instructions from both of you or a court order with regard to the transfer of funds or other transactions in the SPA.

Agreement. By signing this form, you (a) state under penalty of perjury that the information relating to the Primary Applicant and the Co-Applicant, if applicable, set forth in this form is true and correct and (b) acknowledge reading, understanding, agreeing to, and receiving a completed copy of, this entire Account Agreement, including the Electronic Funds Transfer Authorization and the Additional Terms and Conditions, and, in particular, the Consent to Contact By Electronic and Other Means (§15), Agreement to Arbitrate (§25), and Consent to Electronic Disclosures (§27).

PRIMARY APPLICANT SIGNATURE DocuSigned by: BBABFEBAD92F40E...	CO-APPLICANT SIGNATURE
DATE	DATE
12/02/2024	

FEE SCHEDULE*

SPA FEES:

Setup Fee (one-time fee).....	\$9.00
Monthly Service Fee (per month).....	\$9.75

Transaction Fees

Deposit Services (per deposit transaction)	
Non-Sufficient Funds.....	\$0.00
Disbursement Services (per transaction)	
Creditor Payment.....	\$0.00
Phone Payment.....	\$0.00
Physical Check (STD).....	\$0.00
Physical Check (2 day).....	\$0.00
Physical Check (Overnight).....	\$0.00
Wire Transfer.....	\$0.00
Stop Payment Order (per request).....	\$0.00
Account Closure Fee.....	\$0.00

FINXERA CUSTOMER SERVICE

Website: <http://www.cftpay.com>
 Email: support@cftpay.com
 Telephone: 1-888-348-4543 (toll free)
 Address: 2975 Regent Blvd, Suite 100
 Lockbox Services 208677
 Irving, TX. 75063

* This Fee Schedule reflects any and all fees that may be charged by CFTPay for processing your transactions. The fees charged for the services of your Debt Resolution Provider are separately disclosed in your Debt Resolution Provider agreement. You are responsible for any fees imposed by the financial institution holding your Primary Account.

Electronic Funds Transfer Authorization

(1) To fund your SPA, you authorize Finxera to initiate automated clearing house debit transfers from the designated bank account (your "Primary Account") to your SPA in the amounts and on the dates specified by you or as transmitted to us from you by your DRP from time to time. You further authorize Finxera to initiate debit transfers from your SPA to your creditors, your DRP, and others in the amounts and on the dates directed by you, or as transmitted to us from you by your DRP from time to time. This authorization includes any transfers of fees due to your DRP based on the terms of your DRP agreement, which is incorporated herein by reference, after an approved resolution has been reached and a payment pursuant to that resolution has been made to your creditor. Finally, you authorize Finxera to deduct from your SPA any fees due to Finxera as they accrue and become payable and to credit to your SPA or the Primary Account any credits due to you. You represent that you own the Primary Account and are authorized to provide this instruction. You agree to maintain sufficient funds in the Primary Account to cover each authorized transfer and understand that Finxera may charge you a fee if there are insufficient available funds (see Fee Schedule). The financial institution holding the Primary Account also may impose a charge for insufficient funds. (2) You will notify Finxera and your DRP if you decide to designate another Primary Account or wish to change the amount or the date for transfers to or from your SPA. Notice of any change affecting this authorization (including termination) must be provided to Finxera in such a manner and sufficiently in advance to allow Finxera and any affected financial institution a reasonable opportunity to act, no later than three (3) business days beforehand. (3) This authorization shall remain in effect until you give notice of termination by contacting Finxera Customer Service at 2975 Regent Blvd, Suite 100, Lockbox Services 208677, Irving, TX. 75063, or at 1-888-348-4543. (4) You acknowledge that your transactions must comply with the provisions of U.S. law. (5) Finxera may terminate this processing service, with or without cause, at any time by sending notice to your last known address and/or to your DRP, specifying the effective date of termination, which may be immediate. (6) You understand that you have the right to close your SPA at any time and receive your money back as described in Paragraph 1 of the "Additional Terms and Conditions" on Page 3 of this Account Agreement.

Primary Account Information

Bank Name		
JPMORGAN CHASE BANK, NA		
Routing Number ¹	Account Number ²	Account Type
111000614	129939556	<input checked="" type="checkbox"/> Checking or <input type="checkbox"/> Savings <input type="checkbox"/> Personal or <input type="checkbox"/> Business

¹ Routing Number is the 9-digit number that appears in bottom left-hand corner of your check.
² Account Number is to the right of the Routing Number and after the check number on your check

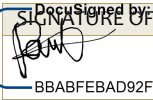
Account Holder Information

Name (as it appears on check or account title)			
Rauf Giwa			
Address (as it appears on check or account records)		City	State
2263 Durand Rd		Fort Mill	SC
			Zip
			29715

Draft Schedule Options (complete one)

MONTHLY			
Amount of Initial Draft(s)	Initial Draft(s) to be executed on or after:	Recurring Monthly Draft Amount	Recurring Draft Schedule, on or after:
			One or more drafts, total not to exceed the Recurring Monthly Draft Amount, in accordance with my DRP Agreement, as modified in writing from time to time, or further instructions.
BI-WEEKLY			
Amount of Initial Draft(s)	Initial Draft(s) to be executed on or after:	Recurring Bi-Weekly Draft Amount	Recurring Draft Schedule, on or after:
\$243.68	12/06/2024	\$243.68	12/20/2024
			Drafts continuing every 14 days, until modified or terminated in writing.
SPLIT			
Amount of Initial Draft(s)	Initial Draft(s) to be executed on or after:	Recurring Semi-Monthly Draft Amount	Recurring Draft Schedule, on or after:
			Drafts continuing on the _ and _ of every month, until terminated in writing.

Typing your name below constitutes a binding electronic signature:

Signed by:  SIGNATURE OF PERSON AUTHORIZING SERVICE PROVIDER TO DEBIT ACCOUNT	DATE
BBABFEBAD92F40E...	12/02/2024

Initial
RG

ADDITIONAL TERMS AND CONDITIONS

1. Your SPA. A SPA will be established for your benefit. Funds deposited to your SPA will be held for your benefit, or the benefit of any named Beneficiary, and will be beneficially owned by you.

Your SPA is a limited purpose account and will not bear interest. You can make electronic fund transfers to and from your SPA only as provided in this Account Agreement. Only transactions directly related to your participation in a debt resolution program will be permitted. You will not be provided with an ATM card or point-of-sale card, and you may not write checks against the account or make in-person withdrawals at our offices or other locations. You may not use your SPA for any illegal purpose or in connection with internet gambling transactions. You have the right to close your SPA at any time and receive the full balance, minus any processing fees and any earned but uncollected fees due to your DRP, within seven (7) business days of your request to us. If sufficient funds are not available to pay the processing fees, the remaining balance will be charged as a processing fee. Should you choose to close your SPA, please contact Finxera Customer Service or your DRP. Any decision to close your SPA while you are making payments on a previously negotiated resolution may cause a breach of your resolution agreement(s); in such case you should contact your DRP to determine what steps, if any, should be taken to maintain your resolution(s).

2. Debits. Our business days are Monday through Friday, excluding federal holidays, and other days on which banks in the state where your account is located are permitted or required to be closed. Because of this, debits may occur up to 4 business days after the scheduled date. The debit amount is inclusive of any fees that you agree to pay under your agreement with your DRP ("DRP Agreement") or this Account Agreement. A zero-dollar transaction may be created to test the validity of your primary account.

3. Authorization to Transfer Funds and Share Information; Confidentiality. You authorize us to: (a) initiate and facilitate transactions directed by you; (b) share your Personal Information (personally identifiable information about you, your SPA, and your SPA transactions) with your DRP; (c) accept and act upon SPA deposit, transfer and payment instructions that we receive from your DRP; and (d) confirm with your DRP instructions purporting to come from you before acting upon them. Such instructions shall identify (i) the amount or amounts you are directing to be disbursed from your Account, (ii) the schedule for such disbursement(s) and (iii) the manner in which such disbursements are to be made. You authorize your DRP to share Personal and DRP program-related information with us for purposes of facilitating payments to your creditors and administering your SPA. You authorize Finxera to disclose information to third parties about your SPA or the transfers you make: (i) where it is necessary for completing transfers; (ii) to verify the existence and condition of your SPA for an authorized third party; (iii) to comply with government agency or court orders, or other legal or administrative reporting requirements; (iv) if you give us your prior written permission; (v) to our employees, auditors, affiliates, partners, or attorneys as needed; (vi) to protect the confidentiality or security of the bank's records pertaining to the consumer, service, product or transaction; (vii) as necessary to fulfill our obligations under this Account Agreement; or (viii) to comply with federal, state, or local laws, rules and other applicable legal requirements.

4. SPA Transactions. Electronic funds transfers will be made into your SPA from another bank account that you designate ("Primary Account"). We will disburse available funds from your SPA to third parties based on your instructions received from you or on your behalf from your DRP in the order received. You are the only one who has the right to authorize transactions involving your SPA funds, either directly or through your DRP. You agree that Finxera shall not be required to monitor or question the

instructions that Finxera receives from you through your DRP on your behalf. You authorize us to initiate and facilitate disbursements from your SPA to pay Transfer Service (debit entries and payments made by us on your behalf) fees and DRP Agreement fees as they are earned to the extent there are immediately available funds in your SPA. We will not process disbursements when there are insufficient funds in your SPA. We will not provide back-up funding under this Account Agreement, nor do we guarantee that all requested transfers or payments can or will be made when there are insufficient funds in your Primary Account or your SPA. From time to time, your DRP, at their sole discretion, may advance funds to you, to assist you meeting your obligations to creditors under resolution agreements. If such advances are made, you authorize us to deduct funds from your SPA to repay such advances. You authorize us to deduct Transfer Service fees as they accrue. If there are insufficient funds in your SPA to pay your Transfer Service fees when incurred, you agree to pay them promptly upon request. Otherwise, we may deduct your Transfer Service fees from the next deposit to your SPA. Instructions received after our established transaction cutoff hour or on non-banking days will be processed on the next banking day.

If we are notified that you have borrowed funds from a third-party lender for deposit into your SPA, you authorize us to credit such loan proceeds to your SPA; in addition, if a balance remains in your SPA after all of your enrolled debts have been resolved by your DRP and all payments have been made to your creditors, your DRP and Finxera, you authorize us to transfer such remaining funds to your lender.

5. Communicating With You; Consent to Contact by Electronic and Other Means. You agree that we may contact you as provided in this paragraph. We may contact you for any lawful reason, including for the collection of amounts owed to us and for the offering of products or services in compliance with our Privacy Notice in effect from time to time. No such contact will be deemed unsolicited. You specifically agree that we may (i) contact you at any address (including email) or telephone number (including wireless cellular telephone, VoIP or ported landline number) as you may provide to us or we may otherwise obtain from time to time; (ii) use any means of communication, including, but not limited to, postal mail, electronic mail, telephone or other technology, to reach you; and (iii) send text messages to your telephone numbers (message or data rates may be assessed by your carrier). Your consent to this not required as a condition of purchasing or receiving our services. You may withdraw this express written consent at any time by contacting us at 2975 Regent Blvd, Suite 100, Lockbox Services 208677, Irving, TX. 75063 or at 1-888-348-4543 and telling us specifically what address(es) or telephone number(s) not to use.

6. Authorized Contact. You may appoint an Authorized Contact to act on your behalf. The Authorized Contact may communicate with us regarding your account but cannot initiate transactions on your account.

7. Our Liability. During such time as we are providing services to you under this Account Agreement, if we do not complete a transfer to or from your SPA on time or in the correct amount according to the terms hereof, we will reimburse you for your direct damages, as limited by this Agreement, unless (i) through no fault of ours, you do not have enough money in your SPA to make the transfer, (ii) circumstances beyond our control prevent the transfer, despite reasonable precautions we have taken, (iii) we have previously terminated this Account Agreement with you, (iv) we receive inaccurate or incomplete information needed to complete a transaction, (v) in the case of preauthorized transfers, we will not be liable where there is a breakdown of the system which would normally handle the transfer, (vi) the funds in the SPA are subject to legal action or administrative process or other encumbrance restricting their use or preventing a transfer to or from your SPA, (vii) we have reason to believe the transfer is unauthorized, (viii) the transfer is subject to another exception set forth in this Account Agreement, and/or (ix) as provided by applicable law.

Initial: 

8. Our Relationships. You understand and acknowledge that Finxera will act solely as your agent and does not: 1) act for or on behalf of your DRP, 2) act as an intermediary between you and your creditors for the purpose of negotiating, resolving or in any way altering the terms of payment of any of your debts, or 3) receive or distribute any funds on your behalf other than as expressly directed by you.

9. Stopping Payments. If you want to stop making payments to your SPA, please contact Finxera Customer Service. We may charge you a fee, as shown in the Fee Schedule, for each stop-payment order you give. You may also contact your DRP, if you have questions. Any stop payment request shall be made by you at least three (3) business days before the preauthorized transfer.

10. Crediting and Payment Holds. If you have arranged to have direct deposits made to your SPA at least once every 60 days from the same person or company, we will credit the amount of the transfer as of the date the funds for the transfer are received, subject to any holds. Funds that are deposited to your SPA by debit entry from your Primary Account may be subject to a hold of up to six (6) days to ensure good funds. A deposit credit is only temporary and is subject to potential reversal until final payment is confirmed. If we give you provisional credit for an automated clearing house (ACH) transfer, but do not receive final payment, you agree to pay us the full amount by other means without prior notice or demand.

11. Conflicting or Unclear Instructions. If we receive conflicting instructions from you and your DRP, we will follow your instruction. If we are uncertain regarding the ownership of SPA funds, your identity, or the authority of any person to give SPA instructions, or if we believe that a SPA transaction may be fraudulent or may violate any law, or if the instructions we receive appear, in our sole discretion, to be unclear in any way, we may: (i) freeze and/or close your SPA and refuse any further transactions until we receive written proof, in form and substance satisfactory to us, of each person's right and authority over the SPA funds; (ii) refuse the transaction in question; (iii) require your signature for the transaction in question; (iv) request instruction from a court of competent jurisdiction; or (v) continue to honor previous instructions received from you (directly or through your DRP) pending confirmation or clarification. We are not obligated to assert such rights or to notify you or your DRP in advance of exercising such rights.

12. Statements and Notices. You may access specific information about your SPA by using the Password that we provide to you or by contacting Finxera Customer Service. "Password" means the security code and/or other method of authentication that you are provided to access SPA information electronically. If you have arranged to have direct deposits made to your SPA at least once every 60 days from the same person or company, you can call us at 1-888-348-4543 to find out if the deposit has been made. All transaction history is also available for your convenience at www.CFTPay.com. You may also request written copies of statements and notices by calling us at 1-888-348-4543. You may also contact your Debt Resolution Provider if you have questions.

13. Your Timely Review. You agree to carefully review all statements, notices, and other information provided to you in connection with your SPA, the Transfer Service or this Account Agreement as soon as possible. Please visit www.CFTPay.com on a regular basis to see if any notices have been posted for your review. You agree to notify us promptly of any erroneous, improper or unauthorized transactions involving your SPA funds. You agree that in no event will we or our agents be liable for special, incidental, consequential, exemplary or punitive damages unless applicable law prohibits such limitations. Unless otherwise required by law, an action or proceeding by you to enforce an obligation, duty or right arising under this Account Agreement or by law with respect to your SPA funds or the Transfer Service must be commenced no later than one (1) year after the day the cause of action accrues.

14. Unauthorized Transfers. Tell Finxera at once if your statement shows transfers that you did not make, or if you need additional information regarding a transfer shown on your statement, by contacting Finxera Customer Service. If you do not give us notice within 60 days after the first statement was provided to you on which the problem or error appeared, you may not get back any money you lost after the 60 days if we can prove that we could have stopped someone from taking the money if you had told us in time. See "In Case of Errors or Questions About Your Electronic Transfers" section for more information.

15. Fees. You agree to pay the fees and charges set forth in the Fee Schedule on the first page of this Account Agreement, as amended from time to time. You agree that fees may be deducted automatically from your SPA as they accrue. The monthly service fee for the first calendar month of the Transfer Service will not be prorated and will be deemed earned on the date your account is opened. Thereafter, the monthly service fee will be earned in full as of the first day of each calendar month and may be collected at that time, without proration if the Transfer Service is terminated prior to the end of the month. Other fees and charges shall be deemed earned at the time of the transaction or event giving rise to the fee or charge.


16. Third Party Disputes/Indemnification. You are responsible for resolving any disputes that arise between or among you, your creditors, your DRP, or any other third parties. Finxera is not a party to any negotiations or agreements between or among you and any of your creditors or your DRP and assumes no obligation to you or them for any of your or their actions, omissions, or obligations. We have no involvement in, nor any responsibility with respect to, your DRP program or the results that you expect from your DRP program. You agree to indemnify, defend and hold us and our officers, directors, agents, employees and affiliates harmless from any and all claims, demands, actions, charges, fines, penalties and damages arising out of: (a) the actions or omissions of your DRP, your creditors or third parties not within our immediate control, (b) actions we take at your request (whether provided directly by you, through your DRP, your Authorized Contact or by another third party on your behalf) or in accordance with this Account Agreement, and (c) your actions and/or omissions. This provision shall survive the termination of your SPA.

17. Governing Law. Except as provided in Paragraph 25 (Arbitration Provision-Agreement to Arbitrate), Federal law and, to the extent not preempted by federal law, the laws of the State of Georgia shall govern this Account Agreement. If any part of this Account Agreement is declared void or unenforceable, the remainder of the terms of this Account Agreement shall remain in full force and effect and the agreement shall be interpreted to give fullest effect to the intentions of the parties as set out in this Account Agreement.

18. Privacy Policy/USA PATRIOT Act Compliance. We are committed to securing the privacy of your Personal Information. We allow only approved personnel to have access to your Personal Information, and we share your Personal Information only with your consent or as required or permitted by law. For more details, please see our Privacy Notice which you will receive by mail and is available on our website at www.cftpay.com/policy.html. We assume no obligation for the use or disclosure of your Personal Information by any DRP.

Important Information About Procedures for Opening a New Account:

To help the government fight the funding of terrorism and money laundering activities, financial institutions are required by Federal law to obtain, verify and record information that identifies each individual that opens a SPA. *What this means for individuals:* When you open an SPA, we will ask you for your name, residence address, date of birth, social security number, and other information that will allow us to identify you. We may also ask to see a driver's license, passport or other identifying document(s).

Initial: 

19. Changes in Terms. Subject to applicable law, we may at any time add new terms or delete or change the terms of this Account Agreement as required by law or desirable in our sole discretion. You will be notified of any change prior to the effective date of such change by email, text or by notification on www.CFTPay.com, at our sole discretion. You may close your SPA if you do not accept the changes to the terms of this Account Agreement; otherwise, your failure to act will be deemed to reflect your consent to the changed terms. You must promptly notify Finxera if you choose to close the SPA.

20. Assignment. This Account Agreement will bind and inure to the benefit of the respective successors and assigns of each party; provided, however, that you may not assign this Account Agreement or any rights or duties hereunder without our prior written consent and any prohibited assignment is absolutely void. No consent to an assignment by us will release you from your obligations under this Account Agreement. Subject to any applicable requirements of law, we may assign this Account Agreement and its rights and duties hereunder and no consent or approval by you is required in connection with any such assignment. In connection with any assignment, we may disclose all documents and information that we now or hereafter may have relating to you. Subject to applicable law, to the extent that Finxera assigns its rights and obligations hereunder to another party, Finxera thereafter shall be released from such assigned obligations to you and such assignment will affect a novation between you and such other party.

21. Changes in Your Contact Information; Assignment

We may send notices to you by periodic statement posted at www.CFTPay.com, by email or through your DRP. You agree to notify us promptly if any of your contact information changes.

22. Termination and Suspension. You or we may terminate or suspend this Account Agreement with or without cause at any time with notice. You may terminate this agreement by contacting Finxera Customer Service at 2975 Regent Blvd, Suite 100, Lockbox Services 208677, Irving, TX. 75063, or at 1-888-348-4543. The Transfer Service may be suspended if we are uncertain as to anyone's authority to give SPA instructions on your behalf or there is any uncertainty regarding the identity or authority of the person providing SPA instructions. Your termination or suspension of this Account Agreement will not affect any of our rights or your obligations arising under this Account Agreement prior to such termination or suspension.

23. Call Monitoring/Recording. You authorize us to listen to and record any telephone calls between you and us to evaluate the quality of our services or for any other lawful purpose.

24. Postdated Checks, Restricted Endorsement Checks and Other Disputed or Qualified Payments. We can accept postdated deposit checks without losing any of our rights under this Account Agreement. We are under no obligation to accept or hold a postdated check and we reserve the right to process every item presented as if dated the same date received by us or our check processor. You agree not to send us checks marked "paid in full," "without recourse," or similar language. If you send such a check, Finxera may accept it without waiving any of Finxera's rights under this Account Agreement. All notices and written communications concerning postdated checks, restricted endorsement checks, or any other disputed or nonconforming check, must be mailed or delivered to: Finxera Customer Disputes, 2975 Regent Blvd, Suite 100, Lockbox Services 208677, Irving, TX. 75063.

25. IMPORTANT DISPUTE RESOLUTION PROVISIONS – ARBITRATION OF DISPUTES, CHOICE OF LAW, CLASS ACTION WAIVER AND LIMITATION OF ACTIONS The Parties agree that any dispute, controversy, claim or disagreement (collectively referred to as a "Dispute" or "Disputes") between or among them, of any kind, including but not limited to any Disputes arising out of, concerning, or relating to this

Account Agreement and the Finxera Services provided thereunder, shall be resolved on an individual basis solely through final and binding confidential arbitration, conducted before a single arbitrator, administered by Judicial Arbitration and Mediation Services ("JAMS"), pursuant to its Streamlined Arbitration Rules & Procedures, which may be viewed at www.jamsadr.com or by calling JAMS customer service at 800-352-5267. For purposes of this section, "Parties" includes each party's respective successors, assigns, servicers, officers, directors, members, employees, and representatives. Unless otherwise agreed to by the Parties, the arbitration shall be conducted within your county of residence at the time the Dispute arises and shall be resolved in accordance with the procedural laws of the Federal Arbitration Act and any substantive laws of the state of your residence at the time the Dispute arises. If for any reason JAMS cannot, will not, or ceases to serve as an arbitration administrator, the Dispute shall be administered by the American Arbitration Association pursuant to its streamlined rules or by such other arbitration organization that is mutually acceptable to the parties. The arbitrator shall resolve all issues relating to the Dispute, including but not limited to any determinations as to the interpretation, applicability, enforceability, scope, formation, performance or nonperformance of this Agreement. The arbitrator may decide a Dispute upon the submission of documents alone. Either party may submit relevant information, documents or exhibits to the arbitrator for consideration in deciding a Dispute. Each Party agrees to continue performing its obligations under this Account Agreement while any Dispute is being resolved except to the extent the issue in dispute precludes performance (for example, a dispute over payment shall not be deemed to preclude performance). **THE PARTIES AGREE THAT EITHER PARTY MAY BRING CLAIMS AGAINST THE OTHER PARTY ONLY IN HIS, HER OR ITS INDIVIDUAL CAPACITY AND NOT AS A PLAINTIFF, CLAIMANT OR CLASS MEMBER IN ANY PURPORTED CLASS ACTION OR REPRESENTATIVE PROCEEDING. THE PARTIES ALSO AGREE THAT THE ARBITRATOR MAY NOT CONSOLIDATE PROCEEDINGS OF MORE THAN ONE PERSON'S OR ENTITY'S CLAIMS AND MAY NOT OTHERWISE PRESIDE OVER ANY FORM OF REPRESENTATIVE OR CLASS PROCEEDING.** The decision of an arbitrator shall be enforceable as a court order and may be subject to very limited review by a court. The award rendered by the arbitrator shall be final and binding on all parties. Judgment on the award made by the arbitrator may be entered by any competent court with jurisdiction to enforce the award. You or we may seek remedies in small claims court or provisional judicial remedies without arbitrating. You may opt out of this arbitration provision within 30 days of signing this Account Agreement by sending a signed, written notice to Finxera at 2975 Regent Blvd, Suite 100, Lockbox Services 208677, Irving, TX. 75063.

ARBITRATION COSTS. We will advance the costs of filing any arbitration (excluding any attorneys', expert witness', and/or witness' fees). Each party will pay for its respective attorneys', experts' and witness fees, regardless of which party prevails in the arbitration or any appeal. If either party fails to submit to arbitration following a proper demand to do so or fails to comply with the terms of an award or judgment following an arbitrator's decision, such party shall bear the costs and expenses, including reasonable attorneys' fees, incurred by the party compelling arbitration or seeking to enforce the award or judgment.

BINDING ARBITRATION MEANS THAT BOTH PARTIES GIVE UP THE RIGHT TO A TRIAL BY A JURY. IT ALSO MEANS THAT BOTH PARTIES GIVE UP THE RIGHT TO APPEAL FROM THE ARBITRATOR'S RULING EXCEPT FOR A NARROW RANGE OF ISSUES THAT CAN OR MAY BE APPEALED. IT ALSO MEANS THAT DISCOVERY MAY BE SEVERELY LIMITED BY THE ARBITRATOR.

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CONTINUED EFFECT OF ARBITRATION PROVISION. This Arbitration Provision will continue to govern any Disputes that may arise without regard to any termination or cancellation of your SPA. If any portion of this Arbitration Provision (other than the provisions prohibiting class-wide arbitration, joinder or consolidation) is deemed invalid or unenforceable under the FAA (Federal Arbitration Act ("FAA"), 9 U.S.C. §§ 1 et seq., as amended), it will not invalidate the remaining portions of this Arbitration Provision. If a conflict or inconsistency arises between the code of procedures of the selected arbitration administrator and this Arbitration Provision, this Arbitration Provision will control.

26. In Case of Errors or Questions About Your Electronic Transfers

If you think your statement is wrong or if you need more information about a transfer listed on the statement, please telephone us at 1-888-348-4543 or write us at 2975 Regent Blvd, Suite 100, Lockbox Services 208677, Irving, TX. 75063 as soon as you can. We must hear from you no later than 60 days after we sent the FIRST statement on which the problem or error appeared. To dispute a transaction or statement:

- Provide your name and SPA number (if any).
- Describe the error or the disputed transfer and explain as clearly as possible why you believe the transaction is in error or why you need more information.
- Provide the dollar amount of the suspected error.
- Confirm all oral disputes in writing within 10 business days.
- Provide supporting documentation if available.

We will attempt to determine whether an error has occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days to investigate your complaint or question. If we decide to do this, we will credit your SPA within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your SPA.

For errors involving a new SPA, we may take up to 90 days to investigate your complaint or question. For new SPAs, we may take up to 20 business days to credit your SPA for the amount you think is in error. The extended time periods for new SPAs apply to all electronic fund transfers that occur within the first 30 days after the first deposit is made.

We will tell you the results within three (3) business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

27. CONSENT TO ELECTRONIC DISCLOSURES

By signing this document, you agree that we may provide all disclosures, statements, notices, privacy policies, and other communications related to the Account Agreement, the Transfer Service or your SPA, including disclosures required by law (collectively, "Electronic Communications") to you electronically. We will notify you when a new Electronic Communication has been posted on our website at www.CFTPay.com. When you receive the notification, you agree to promptly visit our website to view the Electronic Communication. You may log in to our website using the Password that we provide to you. "Password" means the security code and/or other method of authentication that you are provided to access SPA information electronically. You agree not to disclose your Password to others and to keep it secure. You also agree that your use of your Password constitutes, and you intend it to constitute, your electronic or digital signature on any document or record where your signature is requested or required. By logging in to our website and using your Password, you demonstrate that you can access information that we post on our website. This consent only applies to this SPA.

Upon your request, we will send you a paper copy of any material provided electronically pursuant to this consent. You also have the right to withdraw consent, but if you do, we may terminate the Account Agreement. To withdraw your consent to electronic disclosures, update your electronic mail address or request paper copies, contact Finxera Customer Service, at 2975 Regent Blvd, Suite 100, Lockbox Services 208677, Irving, TX. 75063 or www.CFTPay.com or call toll free 1-888-348-4543. If Finxera changes its hardware or software requirements, then you may withdraw your consent to electronic information without a fee, condition, or consequence.

To access and retain communications, you must meet at least the following requirements (i) access to a personal computer or equivalent device capable of connecting to the Internet, and that supports the following requirements (ii) an Internet Browser that supports HTML 4.0 and SSL-encryption; (iii) software which permits you to receive and access PDF files; and: (iv) means to print or store notices and information through your browser software. All communications in either electronic or paper format from us to you will be considered "in writing." Please print or download a copy of any Electronic Communication that is important to you for your records.

LIMITATION OF LIABILITY

TO THE FULLEST EXTENT ALLOWED UNDER APPLICABLE LAW, EXCEPT AS OTHERWISE SET FORTH IN THIS AGREEMENT, WE MAKE NO EXPRESS OR IMPLIED WARRANTIES, CONDITIONS OR REPRESENTATIONS WITH RESPECT TO THE SERVICES OR OTHERWISE REGARDING THIS AGREEMENT, WHETHER ORAL OR WRITTEN, EXPRESS, IMPLIED OR STATUTORY. NEITHER PARTY SHALL BE LIABLE TO THE OTHER FOR SPECIAL, INCIDENTAL OR CONSEQUENTIAL DAMAGES BY REASON OF A BREACH OF THIS AGREEMENT OR ANY WARRANTY OR OBLIGATION HEREUNDER, EVEN IF SUCH PARTY KNOWS OR SHOULD HAVE KNOWN OF THE POSSIBILITY OF ANY SUCH LIABILITY. IN NO EVENT SHALL EITHER PARTY'S LIABILITY TO THE OTHER PARTY FOR DIRECT DAMAGES EXCEED THE AMOUNT DEPOSITED INTO YOUR SPA ACCOUNT.

Initial: 



Five Lakes Law Group PLLC

PO Box 8280

Philadelphia, PA 19104-8280

T: (855) 441-6129

F: (888) 584-1135

AUTHORIZATION FOR FIVE LAKES LAW GROUP, PLLC

The undersigned, who has/have signed below as either Client or Co-Client, hereby grant Five Lakes Law Group, PLLC, its designated employees, agents, and/or representatives (collectively "FLLG") express authorization and/or permission to speak as my agent with the undersigned's creditors and to negotiate resolution offers for any and all debts, claims, suits, liens, judgments and/or disputes associated with or related to the enrolled debts listed now, or in the future on the Creditor List. The undersigned further authorizes FLLG to furnish a copy of this Authorization Letter (the "Document") to creditors, collection agencies, or others dealing with the enrolled debts listed on the Creditor List and to certify that such creditor's debts, claims, suits, liens, judgments and/or disputes constitute the enrolled debts.

The undersigned hereby gives FLLG full power and authority to perform each and every act which may be necessary or convenient to perform the tasks assigned as fully, for all intents and purposes, as the undersigned (and each of them if more than one) might or could do if personally present, hereby ratifying and confirming all that FLLG shall lawfully do or cause to be done in the name of or on behalf of the undersigned.

NOTICE:

- a. The undersigned hereby authorizes that any and all communications from any creditor, collection agent, attorney, credit bureau, or any other third-party seeking collection, relating to, or associated with the any enrolled debt be directed to FLLG.
- b. The recipient of an original, photocopy or facsimile of this Document is specifically authorized by the undersigned to direct all communications regarding an enrolled debt to FLLG.
- c. This Document is effective upon signing and specifically authorizes the recipient to discuss, disclose and convey documents, and otherwise provide information to FLLG in the same manner recipient would otherwise provide and disclose to the undersigned including but not limited to information concerning any payable, debt, account, lien, suit, or judgment for which the undersigned is allegedly responsible, whether disputed or not.
- d. This Document authorizes FLLG to obtain, review and discuss my consumer credit reports, bank and creditor account information, medical bills and condition, employment status, financial information (whether public or non-public), and any other personal information about the undersigned that is necessary or convenient to resolving the creditor claims.
- e. All communications between my creditors, the parties listed above and FLLG are with my express permission and instruction. FLLG will not make resolution offer decisions for me, and only will accept resolution offers that I have expressly approved. FLLG is authorized to communicate on my behalf only in regard to the attempted resolution offers.



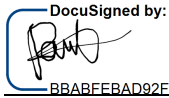
Five Lakes Law Group PLLC
 PO Box 8280
 Philadelphia, PA 19104-8280
 T: (855) 441-6129
 F: (888) 584-1135

HIPAA RELEASE

I/we Intend for this Document, specifically as it pertains to my debts enrolled with FLLG, convey to FLLG the authority to be treated as I/we would be treated concerning to my/our rights with respect to the use and disclosure of my/our individually identifiable health information or other relevant medical records. The authorization provided in this Document applies to information governed by the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 42 U.S.C. 1320(d) and 45 C.F.R. 160-164. Any physician, health care professional, dentist, health plan, hospital, clinic, laboratory, pharmacy, other health care provider, insurance company, or other entity that has provided care, services, or treatment to me/us or that has paid, holds a debt, or is seeking payment of a debt from me/us for such care, services or treatment (a "Provider") is hereby authorized and shall give, disclose, release, and/or discuss, without limitation, all of my/our individually identifiable health information and medical records with FLLG, as if such disclosure, release, and/or discussion was with me/us personally. The authority provided in this section of the Document shall be effective immediately and supersedes any and all prior directives that I/we may have provided to a Provider described above to restrict such access.

The authorization granted in this document will remain in effect unless and until revoked by me/us (which may be done at any time) and/or my relationship with the appointee ends or is terminated.

Date: 12/02/2024

DocuSigned by:

 BBABFE8AD92F40E...

Client Signature

Co-Client Signature (if applicable)

Client Name: Rauf Giwa
 Client SSN: 374-49-7857
 Client DOB: 05/16/1984

Co-Client Name: _____
 Co-Client SSN: _____
 Co-Client DOB: _____



Five Lakes Law Group PLLC

PO Box 8280

Philadelphia, PA 19104-8280

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LIMITED POWER OF ATTORNEY

I/We Rauf Giwa and , located at 2263 Durand Rd, Fort Mill, SC, 29715, hereby appoint **Five Lakes Law Group, PLLC** as my/our attorney to do the following acts:

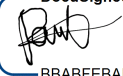
1. Request and receive confidential information relating to any debt owing and/or allegedly due in my/our names, from creditors, collection agencies, credit bureaus, and any other third parties in possession of such information.
2. Act on my/our behalf to represent me/us in negotiating the resolution, reduction, modification, and/or payment of any debt owing and/or allegedly due in my/our name(s), including any lawsuits concerning such debts.

All employees and agents of **Five Lakes Law Group PLLC** may act on my/our behalf with regard to the above powers.

This Limited Power of Attorney shall be effective unless and until revoked in writing by me/us. A copy of this document shall have the same effect as the original.

The authorization granted in this document will remain in effect unless and until revoked by me/us (which may be done at any time) and/or my relationship with the appointee ends or is terminated.

Date: 12/02/2024

DocuSigned by:

BBABFFBAD92F40F

Client Signature

Co-Client Signature (if applicable)

Client Name: Rauf Giwa

Co-Client Name: _____

Client SSN: 374-49-7857

Co-Client SSN: _____

Client DOB: 05/16/1984

Co-Client DOB: _____



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AUTHORIZATION TO COMMUNICATE

I/we Rauf Giwa and , reside at 2263 Durand Rd, Fort Mill, SC, 29715,. By signing below, I/we authorize Five Lakes Law Group, PLLC, including its designated employees, agents, and/or representatives(collectively "FLLG"), to take the following actions:

1. Communicate with my creditors, including but not limited to any of such creditor's agents, representatives, third-party collection agencies or attorneys.
2. Discuss any and all details of my financial situation, all for the purpose of negotiating resolution offer for my debt obligations;and
3. Obtain records, statements of account, debt validations, credit reports and any other documents detailing the outstanding balances, payment history, financial terms, and other information for the debts and financial obligations allegedlyowed by me.

HIPAA RELEASE

I/we Intend for this Document, specifically as it pertains to my debts enrolled with FLLG, convey to FLLG the authority to be treated as I/we would be treated concerning to my/our rights with respect to the use and disclosure of my/our individually identifiable health information or other relevant medical records. The authorization provided in this Document applies to information governed by the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 42 U.S.C. 1320(d) and 45 C.F.R. 160-164. Any physician, health care professional, dentist, health plan, hospital, clinic, laboratory, pharmacy, other health care provider, insurance company, or other entity that has provided care, services, or treatment to me/us or that has paid, holds a debt, or is seeking payment of a debt from me/us for such care, services or treatment (a "Provider") is hereby authorized and shall give, disclose, release, and/or discuss, without limitation, all of my/our individually identifiable health information and medical records with FLLG, as if such disclosure, release, and/or discussion was with me/us personally. The authority provided in this section of the Document shall be effective immediately and supersedes any and all prior directives that I/we may have provided to a Provider described above to restrict such access.

The recipient of this Authorization to Communicate, whether by original, photocopy, facsimile or electronic copy, is specifically authorized by the undersigned party(ies) to contact, receive communications from, and communicate with FLLG regarding any of the purposes listed herein.

The authorization granted in this document will remain in effect unless and until revoked by me/us (which may be done at any time) and/or my relationship with the appointee ends or is terminated.

Date: 12/02/2024

DocuSigned by:
A blue ink signature of Rauf Giwa is visible within the DocuSigned box.
BBARFFB9AD92F40E

Client Signature

Co-Client Signature (if applicable)

Client Name: Rauf Giwa

Client SSN: 374-49-7857

Client DOB: 05/16/1984

Co-Client Name: _____

Co-Client SSN: _____

Co-Client DOB: _____



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Your Attorney: Kristina Pierce (Five Lakes)

CREDIT REVIEW AUTHORIZATION FORM

I/We hereby authorize **Five Lakes Law Group, PLLC** ("Five Lakes"), and its designated paralegals, agents and representatives, to conduct a review of and verify my credit history in order to process my request for debt resolution services. I/We further authorize Five Lakes to order a consumer credit report and verify other credit information, including past and present credit obligations and payment history.

Five Lakes may also utilize the services of consumer reporting agencies to further verify my personal credit information and the information Five Lakes obtains is only to be used in the processing of my request for debt resolution services. It is understood that a copy of this form will also serve as my authorization. This authorization expires 120 days from the date indicated below.

Privacy Act Notice: This information is to be used by the company collecting it to determine whether you qualify for debt resolution services under its program. You do not have to provide this information, but if you do not then your request for debt resolution services may be delayed or rejected. Disclosure of your Social Security number (SSN) is voluntary, although we are requesting your SSN to keep your records accurate since other people may share your same name.

Signed by:

A handwritten signature in black ink, appearing to read "Rauf Giwa", is written over a blue circular digital stamp.

BBABFEBAD92F40E...

Client Signature

Client Name: Rauf Giwa

SSN: 374-49-7857

Date: 12/02/2024

Co-Client Signature (if applicable)

Co-Client Name:

SSN:

Date:



PERSONAL CASH FLOW ASSESSMENT

This personal cash flow assessment has been prepared for you in connection with your application to enroll in our debt resolution program. This assessment is based upon the financial information and documents you have shared with us and our estimates of the amounts that will be required to settle each of your debts within a reasonable program term. We have not independently verified the information you have supplied to us so we encourage you to review the information presented below and advise us immediately if you find any errors or if there is additional information that should be taken into consideration.

Your success in our debt resolution program depends upon you making regular deposits into your dedicated account. The amount of your program deposit has been calculated based upon the amount of your outstanding debt and your program length. The periodic program deposit presented in the table below reflects a periodic deposit amount that we believe is appropriate given your particular circumstances. If you believe a different periodic deposit amount is necessary, please contact your debt consultant immediately.

PART I: CASH FLOW SUMMARY & PROGRAM DETAILS

Monthly Cash Flow Summary	
Available Monthly Household Income (from page 2)	\$7,000.00
Total Estimated Monthly Expenses (from page 4)	\$5,338.00
Monthly Program Deposit ¹	\$527.98
Optional Third-Party Product/Service Expense (Included in the Monthly Program Above)	\$0.00
Monthly Remaining Amount (income <i>minus</i> expenses <i>minus</i> program deposit) ²	\$1,134.02
Program Details	
Total Enrolled Debt	\$29,254.00
Estimated Total Settlement Amount	\$16,967.32
Settlement Fees	\$7,898.58
Total Estimated Program Cost (Estimated Total <i>plus</i> fees)	\$24,865.90

(1) Your program deposits may be scheduled monthly, semi-monthly or bi-weekly. If your program deposits are scheduled other than monthly, for purposes of this cash flow assessment we have converted your program deposits to a monthly amount. This monthly amount includes your dedicated account provider charges. (2) If your Monthly Remaining Amount is a negative number, you may not have enough funds available each month to meet the ongoing deposit requirements of a debt resolution program. If, however, you believe you are or will be able to meet these deposit requirements, please initial here [Applicant: _____ / Co- Applicant: _____] to confirm that (i) you understand the ongoing program deposit requirements described above, (ii) you have the ability to meet these program deposit requirements and (iii) you have been informed of other options, including bankruptcy, that may be appropriate for you, given your particular circumstances. In addition, please explain further how you expect to supplement your income or manage your expenses by clicking on all grounds for exemption that may apply to you:

Additional Employment (i.e., second job)

Tax Refund Pending

Gift/Donation from Family or Charity

Overtime at Current Job

Future Child Support/Alimony (i.e., currently in court)

Funds from 401K/Stocks

Pay Off Other Debt in The Next Year (i.e., car loan)

Reduce Ongoing Discretionary Subscriptions (e.g., cable, Netflix, gym, etc.)

Other



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 Your Attorney: Kristina Pierce (Five Lakes)

PART II: PERSONAL CASH FLOW STATEMENT

Your personal cash flow statement has been prepared based upon the financial information and documents you have shared with us. This has enabled us to assess your ability to participate in our debt resolution program, as well as the appropriateness of debt resolution for you given your particular circumstances. This personal cash flow statement will also help you understand the impact your participation in your debt resolution program will have on your monthly budget.

In preparing your personal cash flow statement, we have asked that you list all sources of income, including unemployment, child support and all forms of governmental assistance. We have asked that you include all forms of income because it is important that we have a complete view of your monthly cash flow.

Estimated Monthly Income			
<i>For income that you receive other than monthly, please take the whole-year total and divide by 12 before entering.</i>			
Applicant:		Co-Applicant:	
Description:	Monthly Amount:	Description:	Monthly Amount:
Employment Income (net of all deductions) from pay stub(s)	\$7,000.00	Employment Income (net of all deductions) from pay stub(s)	\$0.00
Self-employment (including freelance/gig) income from 1099s (net of estimated federal and state tax payments)		Self-employment (including freelance/gig) income from 1099s (net of estimated federal and state tax payments)	
Social Security Unemployment Alimony Child Support Other Gov't Assistance Annuities Dividends Retirement Other (describe) ¹	\$0.00	Social Security Unemployment Alimony Child Support Other Gov't Assistance Annuities Dividends Retirement Other (describe)	
Available Monthly Household Income:			\$7,000.00

¹ In the space reserved for "other" please include any and all items of income that are not identified above, including support you may receive from friends, family and other sources.



Estimated Monthly Living Expenses	
<p align="center"><i>(DO NOT INCLUDE EXPENSES RELATED TO ANY ENROLLED DEBTS)</i></p> <p align="center"><i>For expenses that you pay other than monthly, please take the whole-year total and divide by 12 before entering.</i></p>	
HOUSING (monthly rent or mortgage payment (principal, interest, taxes, insurance and any homeowner's or other assessments)) Please check the box: RENT <input type="checkbox"/> or OWN <input type="checkbox"/> your home?	\$2,500.00
MEDICAL (medical insurance premiums, out of pocket cost of prescriptions, co-pays, monthly portion of annual deductible)	\$0.00
TRANSPORTATION (auto loans or leases, car repairs and maintenance, gas, parking, commuting, insurance, registration)	\$763.00
FOOD (groceries, snacks and eating out)	\$600.00
DEPENDENT CARE (daycare, babysitting, in-home or nursing care)	\$0.00
UTILITIES (cable TV, internet, electric, gas, water, trash, all phone/cell bills)	\$300.00
PERSONAL CARE, HOUSEHOLD, AND MISC. (charity, gifts, pets, clothes, toiletries, hair care, laundry, dry cleaning, gym, other)	\$200.00
COURT-ORDERED EXPENSES (child support, alimony, judgment payments)	\$975.00
OTHER EXPENSES (describe)	\$975.00
BACK TAXES	\$0.00
Total Estimated Monthly Living Expenses:	\$5,338.00

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Your Attorney: Kristina Pierce (Five Lakes)

Estimated Monthly Non-Enrolled Debt Expenses	
<i>(DO NOT INCLUDE EXPENSES RELATED TO ANY ENROLLED DEBTS)</i> <i>For expenses that you pay other than monthly, please take the whole-year total and divide by 12 before entering.</i>	
GOVERNMENT STUDENT LOANS (monthly payment on government insured loans in NON-DEFERRED STATUS)	\$0.00
PRIVATE STUDENT LOANS (monthly payment on private loans in NON-DEFERRED STATUS)	\$ _____
MEDICAL DEBT (excluding premiums, non-delinquent co-pays, etc.)	\$0.00
OTHER DEBT EXPENSES (describe):	\$ _____
Total Estimated Monthly Non-Enrolled Debt Expenses:	\$0.00

TOTAL ESTIMATED MONTHLY LIVING AND DEBT EXPENSES	\$5,338.00
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I hereby acknowledge that the financial requirements of my debt resolution program have been explained to me and that I understand that my program success is contingent upon my making the described program deposits into my dedicated account. I further acknowledge that the financial information I have provided is, to the best of my knowledge, true, correct and complete.

DocuSigned by:

 BBABFEBAD92F40E...

12/02/2024

Applicant Signature

Date Signed

Co- Applicant Signature

Date Signed