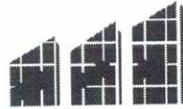


THE CORPA GROUP



Tel: (905) 331-1333

Fax: (905) 331-0234

GENERAL

RUSH

1860 Appleby Line, Suite 494,
Burlington, Ontario.
CANADA L7L 7H7

HOW TO USE THIS QUESTIONNAIRE

This questionnaire is a guideline to assist you with some of the information we will require. You have the option of using this form and faxing it back to us, or you may use this as a guide to assist you when you dictate your letter of instructions to us. Please feel free to contact us by telephone, should you wish to speak to an investigator directly. Complete this form based on the information you have available. We don't expect this form to be completed in full. The minimum information we require is the subject's **FIRST** and **LAST NAME** and the **LAST KNOWN ADDRESS**. Correct spelling of the subject's **FIRST** and **LAST NAME** is of the utmost importance.

CLIENT INFORMATION

NAME OF FIRM:	TELEPHONE NO:
YOUR NAME:	FAX NO:
ADDRESS:	PROVINCE/STATE:
POSTAL/ZIP CODE:	NAME OF SECRETARY OR ASSISTANT:
YOUR MATTER NAME:	YOUR FILE NO:

RETAINER AGREEMENT

I hereby authorize the Corpa Group Inc., to conduct the enclosed investigation on our behalf. *I understand that if Corpa does not locate the subject I am charged only \$75.00 for a report or an affidavit.* If they are successful in locating the subject I will be charged the fee I have selected below: I agree to pay said fees upon receipt of a report and invoice.

() **GENERAL SKIP TRACE:**.....\$320.00

() **RUSH SKIP TRACE (3 DAYS OR LESS)**\$375.00

(Rush Skip Trace: If we can't find the subject in 3 days or less, the trace will be treated as a General Skip Trace)

Authorized Signature:.....

Date:

CONFIDENTIAL

SUBJECT INFORMATION

CONFIDENTIAL

SUBJECT'S FIRST & MIDDLE NAME:	SUBJECT'S LAST NAME:
DATE OF BIRTH: (Approximate Age)	SOCIAL INSURANCE NUMBER:
LAST ADDRESS: (Unit or Apt. No.)	PROVINCE/ STATE: POSTAL ZIP CODE:
DATE LAST AT THIS ADDRESS:	PHONE NUMBERS (List all numbers in service, home, business, car, fax, etc.)
LAST EMPLOYER'S & EMPLOYER NAME:	EMPLOYER ADDRESS:
PROVINCE/ STATE:	POSTAL/ ZIP CODE: LAST EMPLOYER PHONE NO.:
POSITION AT LAST EMPLOYER:	SUBJECT'S TRADE OR PROFESSION:
SUBJECT'S DRIVER'S LICENCE NUMBER:	LICENCE PLATE NUMBERS OR ANY VEHICLES:
DESCRIPTION OF ANY VEHICLES:	

CONFIDENTIAL

SUBJECT'S SPOUSE

CONFIDENTIAL

SUBJECT'S SPOUSE: (X) Married Common Law Divorced Separated

SPOUSES FIRST & MIDDLE NAME: _____ LASTNAMES: _____

DATE OF BIRTH: (Approximate Age) _____ SOCIAL INSURANCE NUMBER: _____

SPOUSES ADDRESS: (X) Same as Spouse Different than above

SPOUSES LAST ADDRESS: _____ PROVINCE: _____ POSTAL CODE: _____

DATE LAST AT THIS ADDRESS: _____ PHONE NUMBERS (List all numbers in service, home, business, car, fax etc.) _____

SPOUSES LAST EMPLOYER NAME: _____

ADDRESS: _____

PROVINCE/STATE: _____ POSTAL/ZIP CODE: _____ LAST EMPLOYER PHONE NO.: _____

POSITION AT EMPLOYER: _____ TRADE OR PROFESSION MOST OF THE TIME: _____

SPOUSES DRIVER'S LICENSE NUMBER: _____ LICENSE PLATES: _____

GENERAL INFORMATION

**NAMES AND ADDRESSES OF FRIENDS OR RELATIVES WHO MIGHT BE ABLE TO PROVIDE INFORMATION:
(PLEASE PROVIDE TELEPHONE NUMBERS)**

BUSINESS OR CREDIT REFERENCES:

IF YOU HAVE ANY; OF THE FOLLOWING DOCUMENTATION, PLEASE PLACE AN (X) AND EMAIL A COPY TO OUR OFFICE.

(Please do not mail any original documentation as we will not be returning them to you).

- Credit Searches Equifax/TransUnion/TRW Driver's License or Vehicle Searches
- Applications (credit, employment, lease, loan, rental, stock, tenancy, etc.)
- Articles of Incorporation (Last page showing the subject as a director)
- Motor Vehicle Accident Report, Police Report or Offence Notices
- P.P.S.A. N.S.F. Cheques Vehicle Registration Info

DO YOU HAVE ANY JUDGEMENT AGAINST THE SUBJECT (X) YES NO

IF YES, PLEASE STATE AMOUNT AND WHEN WAS JUDGEMENT OBTAINED?

Has the subject ever signed a consent, giving authorization for you or your client to conduct a financial investigation? (ie. As is usually found in loan, lease or credit applications) (X) YES NO
Please explain

GIVE A BRIEF EXPLANATION WHY THIS TRACE IS REQUIRED, AND STATE ANY OTHER INFORMATION.

Answers to Frequently Asked Questions

Our turnaround time varies based on volume and difficulty. We work towards an average of two weeks or less. We will ultimately send you a close out memo of our efforts if the trace fails.

Please do not call our office seeking to know the status. You are welcome to email us corpa@corpa.com

We do not send status reports along the way. Either we have the subject located or we don't. We will ultimately report one way or another.

This form is to be used for locates (Skip Tracing) exclusively. Corpa does not offer the service of "employment only" or "bank account only" investigations. We do offer full asset investigations (please refer to our price list at our website at www.corpa.com for more information.