

Family Financial Education Foundation
Addendum to Engagement Agreement for Residents of the State of Utah

Client No.

1. You have the right to review any file maintained by FFEF on you, as provided under 15 U.S.C. Sec. 1681 et seq., as amended, the Fair Credit Reporting Act.
2. You have the right to have a review of your file conducted free of charge by any credit reporting agency that issued a report upon which a credit denial was based, if requested within 30 days of when you receive a notice of denial of credit.
3. Upon request, you may receive a complete copy of your file maintained by FFEF.
4. You have the full and absolute right to dispute the completeness or accuracy of any item contained in your file maintained by FFEF.
5. FFEF's objective is to help individuals and families become financial stable, debt-free and better able to manage their resources by teaching them correct money-management and budgeting principles and by working out payment arrangements with creditors to ensure their clients a brighter financial future. Services provided by FFEF include a debt management program, bill-paying program, Internal Revenue Service program and a customer service-counseling program. The cost of the services is an initial set-up fee of fifty dollars (\$50.00) and a monthly fee not to exceed \$10 times the number of creditors remaining in a plan at the time the fee is assessed, not to exceed fifty dollars (\$50.00).
6. FFEF maintains a Surety Bond with Employers Mutual Casualty Company. In certain situations, you would have the right to proceed against the bond or trust account required under Utah Code Section 13-21-3.
7. The address of Employers Mutual Casualty Company is P.O. Box 712 Des Moines, Iowa 50303

IMPORTANT INFORMATION FOR YOU TO CONSIDER:

8. Debt-management plans are not right for all individuals, and you may ask us to provide information about other ways, including bankruptcy, to deal with your debts.
9. Using a debt-management plan may hurt your credit rating or credit scores.
10. We may receive compensation for our services from your creditors.

I hereby acknowledge that I have received a copy of this Written Information and Disclosure Statement. (One copy is to be retained by client and the other copy is to be returned with the Enrollment Packet to FFEF).

William Richards Cluny

Family Financial Education Foundation

Dated this _____ day of _____, 20____

BY: Wm. Richards Cluny
ITS: President

Client

Co-Client

Sign both copies and send one back to FFEF

NOTICE OF CANCELLATION

(To be included with all Utah Contracts)

You may cancel this contract, without any penalty or obligation, within five days from the date the contract is signed.

If you cancel, any payment made by you under this contract will be returned within 10 days following receipt by Family Financial Education Foundation of your cancellation notice.

To cancel this contract, mail or deliver a signed dated copy of this cancellation notice, or any other written notice, to Family Financial Education Foundation at 724 Front Street, Suite 340, P.O. Box 2125, Evanston, Wyoming 82931-2125, not later than midnight _____**.

I hereby cancel this transaction.

Client/purchaser's signature

Date

** A date must be inserted. The date must be five days from the date that the contract is signed. In counting the five days, the day that the contract is signed, Sundays and holidays should not be counted. For example, if the contract is signed on a Thursday and the following Monday is a legal holiday, the client would have until midnight on the following Thursday to exercise his or her right to cancel within the 5 days following the date the contract is signed.

I hereby acknowledge that I have received a copy of this Notice of Cancellation. (One copy is to be retained by client and the other copy is to be returned with the Enrollment Packet to FFEF).

Client Signature

Sign both copies and send one back to FFEF