



**7207 Regency Square, Suite 100
Houston, Texas 77036
713-464-8322
Fax 713-467-8744**

COLLECTIONS AGREEMENT

1. CLIENT AGREES TO PAY **CRSI** A FEE EQUAL TO ____ % OF MONIES COLLECTED. CLIENT AGREES TO PAY **CRSI** A FEE EQUAL TO ____ % OF MONIES COLLECTED ON SKIP ACCOUNTS AND ____ % FOR MONIES COLLECTED ON LEGAL ACCOUNTS.
2. THE CLIENT AGREES TO PAY THE AGENCY **\$1.00** FOR EACH ACCOUNT REPORTED TO CREDIT BUREAU, AS WELL AS **\$1.00** FOR EACH ACCOUNT THAT IS REMOVED FROM THE CREDIT BUREAU.
3. CLIENT AGREES TO PAY AGENCY **\$1.00** FOR EACH ACCOUNT ASSIGNED TO ELECTRONICALLY STORE ACCOUNTS.
4. AGENCY WILL NOT ACCEPT FOR COLLECTIONS ANY DELINQUENT ACCOUNT WITH A BALANCE UNDER \$50.
5. THIS AGREEMENT WILL BE EFFECTIVE UNTIL CANCELLED BY EITHER PARTY GIVING 30 DAY WRITTEN NOTICE OF CANCELLATION TO THE OTHER. AT SUCH TIME CRSI WILL RETAIN ALL ACCOUNTS THAT HAVE PREVIOUSLY BEEN ASSIGNED TO CRSI AND REPORTED TO CREDIT AGENCIES. CRSI WILL BE PAID COMMISSION ON THESE PREVIOUSLY ASSIGNED ACCOUNTS IF THEY PAY TO CLIENT OR TO AGENCY AFTER CANCELLATION.

I HAVE READ, UNDERSTAND AND ACCEPT ALL TERMS AND CONDITIONS OF THE AGREEMENT.

ATTEST:

CLIENT: _____

ADDRESS: _____

CITY, STATE, ZIP

SIGNATURE DATE

ATTEST:

**AGENCY: CERTIFIED RECOVERY
SYSTEMS, L.L.P.**

SIGNATURE DATE