

MARKET FOR PROFITS

PRELIMINARY SPEAKING AGREEMENT

Client/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact person: _____

Phone #: _____

Fax #: _____

Email: _____

Web Site (for research purposes): _____

Date of engagement: _____ Time: _____

Length of Presentation: _____ Approx. Audience size: _____

Location of Engagement(s): _____

Subject / Suggested Title: _____

A deposit of 50% of the fee is due upon return of this confirmation. The balance is payable on site the day of the performance.

Please make checks payable to Market For Profits

FEE: \$ _____

(Less Deposit): \$ _____

Total Amount Due On-site \$ _____ Notes: _____

Alfred J. Lautenslager
630-871-0085

Date

Client

Date

Please fax a copy of this agreement to 630-871-0087. Or mail it to:

Alfred J. Lautenslager
Market For Profits
297 Rice Lake Square
Wheaton, IL 60187