

# VITALINE, INC.



Linda Woodward Geiger  
Certified Genealogist<sup>SM</sup>  
Certified Genealogical Lecturer<sup>SM</sup>

## CONSULTING AND RESEARCH AGREEMENT

I, \_\_\_\_\_, hereby engage the research services of Linda Woodward Geiger, CG<sup>SM</sup>, CGL<sup>SM</sup>, d/b/a Vitaline, Inc. and authorize her to conduct research on my behalf, for an amount not to exceed \$ \_\_\_\_\_ (minimum of five hours or \$250), as per my instructions — state as concisely and briefly as possible (use reverse side if necessary):

- 1)
- 2)
- 3)

I have/will provided to said Linda Woodward Geiger, CG<sup>SM</sup>, CGL<sup>SM</sup>, all pertinent information on the subject to be researched.

I hereby grant permission to said researcher, Linda Woodward Geiger, to use materials and/or reports (respecting seventy-two years for privacy restrictions) done on my behalf, as warranted, for submission to the Board for Certification of Genealogists for her certification renewal applications and/or as samples as parts of lectures and/or articles which she develops.

Vitaline, Inc. agrees to provide one or more detailed report(s), covering all sources checked during the research, with analysis, and a detailed report of time consumed and expenses incurred. Reports will be mailed to the person whose name and address appears below, in a timely fashion.

The research will be charged as follows:

- \$ 50 per hour including research, analysis, report, and consultation.
- Expenses including, but not limited to, postage, microfilm copies, photocopies (2 copies will be reproduced for each item - one for the client's files, and the second for files of Vitaline, Inc.), long distance telephone calls, film and film developing, film rentals, and supplies.
- Travel expenses outside the 35-mile radius will be charged at 40.5 ¢ a mile, plus parking and tolls, \$20 per travel hour.
- When extensive travel is authorized by the client, lodging expenses, and \$30 per diem will be charged

Enclosed is a check or money order in the amount of \$ \_\_\_\_\_, (minimum \$250). The fee will be held in escrow until commencement of the project.

Signature \_\_\_\_\_

Address \_\_\_\_\_ Date \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Tel \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Mail this form with your check or money order to Vitaline, Inc.

[Signature of client denotes acceptance of conditions.]