

I **(client)** of (address) , hereby acknowledge and agree that the amount of \$ advanced by Carelink, is to be deducted from compensation monies to be paid to me pursuant to an application for compensation. I also acknowledge and agree that this will apply to any further advances of money by way of cheque from Carelink.

Dated the \_\_\_\_\_ day of \_\_\_\_\_ 2012

SIGNED .....