

# I WANT TO BE ONE OF THE SILENT MARKETING PARTNERS/BULK BUYERS & TO INVEST \$500

In returns, this company had promised to help me to market , distribute and dispose of the the products monthly.

I would, therefore, get paid **\$20 weekly for 52 weeks.**  
**Total \$1,040** for my every \$500 invested. 2 Spots

To: [www.DMARKETGURUS.com](http://www.DMARKETGURUS.com). (A div of: Top Rank Business Associates Group) 1603 Capitol Ave. #310 #400, Cheyenne, WY. 82001, USA. Tel: 800-905-9530 **Fax: 888-317-4874 (Fax your contract to us now)**

## MEMORANDUM OF UNDERSTANDING:

I WOULD LIKE TO JOIN THE 80 SPOTS INVESTORS  
 I want 1 spot for \$250

I want 2 spots for **\$500.00**

**HERE'S MY VOLUNTARY-DECLARATION** : Whether I am an active or a silent participant of this program, I understood that this is a business opportunity investment

and it is not securities investment such as stocks, bonds, commodity trading, loan act or any form of loans or securities trading. Products and Services are to be moved with my money by the consulting firm's own MERCHANTS and I am to be paid monthly or weekly.

I have read and understood this contractual Agreement & all the supporting document of this Concept. Also, I've visited **WWW. DMARKETGURUS.COM &** all other supporting websites

I , therefore, have no further questions or all my questions or concerns has been answered satisfactorily prior to giving or sending my money.

**Payments to me:**  
 My first payment for \$20 OR **\$20 weekly** would arrive in 30 days and every 7 days (every week) thereafter for 52 weeks

**This Contract once notarized becomes a legal document and it is legally binding**

My Name \_\_\_\_\_ Tel:( ) \_\_\_\_\_  
 Address \_\_\_\_\_ Apt #: \_\_\_\_\_  
 City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Codes \_\_\_\_\_  
 Country \_\_\_\_\_ Email: \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

**THIS DOCUMENT WILL BE LEGALLY NOTARIZED BY US (THE COMPANY) AND ONE ORIGINAL COPY WILL BE SENT TO YOU, THE INVESTOR.**

Signature on Behalf of : DMARKETGURUS.COM  
 X \_\_\_\_\_ Name: \_\_\_\_\_

**Witnessed By: Commissioner For Oath or Notary Public:**

Name \_\_\_\_\_  
 Address , signature, date: \_\_\_\_\_