

The contract and Agreement

ADDICTIONS TRANSITIONS RECOVERY MANZANA LLC.

On this date _____ name, _____ client and

Name _____ acting agent for ATRM accepts the terms of this recovery program, starting on

This date _____ for a ten days ending on this date _____.

During this time frame the above named person is in the care and supervision

Acting agent of ATRM LLC.

Terms in this agreement state that Addictions Transitions Recovery Man Zana[®] provides (Limited communication) – meals- lodging and transportation, for the client. A Progress and fitness status report will be provided to family. Daily or as deemed needed to ensure a comfort level as to location and activities engaged.

Treatment is designed to achieve the goals needed for a life free of using drugs and build a realistic foundation for clean living cutting no corners. Cost to be agreed upon per individual needs. Base cost is \$ 2,500.00 due at signing of contract. Payable to Addictions Transitions Recovery Man Zana[®]

After Care (optional) but highly recommended \$40.00 per day for four weeks @ three time a week, one on

One. Life Time Assistance 24/7 \$0.0 Signed _____

Signed _____ date _____

This Service Priceless

ATRM LLC.