

ASSIGNMENT SCHEDULE

By

To

DANIELS CAPITAL CORPORATION

Case Number	County	State	Disposition Date	Defendant	Judge	Amount
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
Voucher Total (VT)						

I, the undersigned Assignor, declare and certify that I am a licensed attorney, in good standing, and that the above claim is true and correct and represents my services actually rendered and that said amount is due and payable to the undersigned Assignor. I further declare that the above claim is not a duplication of charges and expenses in any companion (or otherwise) case, and also that all previously advanced fee declarations have been completed and filed with the appropriate court/clerk. By my signing below, I further declare and certify on behalf of my firm, joint assignors, and myself, that I have read, understand, accept, agree, and am personally bound by the terms and conditions of the fee agreement/contract as posted this day on the website of www.danielscapital.com and hereby incorporate the posted agreement/contract as if attached to this affidavit/schedule. A facsimile of this affidavit/schedule has the same effect as the original.

Assignor:

 On behalf of myself, firm, & joint assignors.

Sworn to and subscribed before me this _____ day of _____, 20____.

Notary Public

<i>FOR DCC USE ONLY</i>		
Funding Date		
Funding Amount	_____ %	
Reserve	_____ %	

Fee as computed below:

- (i) 0.0017 per diem of above VT for each of first 60 days;
- (ii) 0.0000 per diem of above VT from day 61 thru day 120;
- (iii) 0.0008 per diem of above VT from day 121.

Approved By: _____
 Representative of Daniels Capital Corporation

PREFERRED METHOD OF PAYMENT: **SELECT ONE**

Regular Mail
 Wire Transfer
 Overnight Delivery

DCC Use Only:

Wired \$ _____ on ___/___/___

\$ _____ service charge (if any)

\$ _____ applied to account (if any)

See enclosure (if applicable)