

# TO FINANCE A GIFT CARD DISTRIBUTOR.

## INVESTOR'S CONTRACTUAL AGREEMENT



### APPLICATION & AGREEMENT TO FINANCE A DISTRIBUTOR

**Top Rank Business Associates Group**  
Office: 2701 Thomes Ave. Ste. 1471, Cheyenne, WY. 82001

Tel: 775-333-1125 Tel: 1-800-905-9530  
Fax: 1-888-317-4874 toprank@gate4deal.com

I have read and understood this contractual Agreement , the \$360M projected gate4deal VIP Card and The \$208M projected Unique Magazine Concepts and I want to participate. I want to sponsor or finance a gate4deal VIP GIFT CARD Distribution System and thereby make a profit on my money.

Enclosed is my check or money order FOR THE SUM OF USD \$ \_\_\_\_\_ .00

Kindly send my USD \$ \_\_\_\_\_ .00 Fixed monthly Income which is a 10% of my original investment (10% x 12 months) to me every month for 12 months and at the end of the 52nd week / 12th month, kindly return or give my original investment back to me 100%

I shall earn a total income of \$ \_\_\_\_\_ .00 on my \$ \_\_\_\_\_ .00 investment for financing your active gate4deal VIP advertising gift card distributors.

I shall receive my first check in 37 days and every 30 days thereafter.

Here's My Voluntary Declaration : Whether I am an active or a silent participant of this program, I understand 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 company and I am to be paid monthly or weekly. I have visited [www.gate4deal.com](http://www.gate4deal.com) , [www.share-money.com](http://www.share-money.com) and [www.secrets40.com](http://www.secrets40.com) websites and have read the business plan documents & info.

I , therefore, have no further questions or all my questions or concerns has been answered satisfactorily prior to sending my money. This Contract once notarized becomes a legal document and it is legally binding.

My Name \_\_\_\_\_ Tel ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Apt #: \_\_\_\_\_ City \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip/Postal Codes: \_\_\_\_\_ 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 :**

**Top Rank Business Associates Group, Inc** \_\_\_\_\_

**Name: Dr. Israel Fagbemi**

Witnessed By: Commissioner For Oath or Notary Public:

Name

Address , signature, date: