INDEPENDENT CONTRACTOR'S AGREEMENT

Date:	File No:
Following is an outline of arrangement which we have	our agreement and a brief summary of the terms of the e discussed.
independent contractor for independent contractor, you project according to sched discussed. As per agreeme	VISION INTERNATIONAL ALLIANCE INC., as an Job/Project/Program assigned as need base. As an are responsible for successfully completing the assigned le, following specifications, and within the policy guidelines at, you will request funding for designated to you by using lest Form for your services rendered.
pay of regular employees v contractor, you will not be	deductions which we are legally required to make from the rill not be withheld from your payments. As an independent entitled to any fringe benefits that would be offered to regular ployment insurance, medical insurance, pension plans, and
information which is impoint information must be treate	n may be in contact with or directly working with proprietary rtant to our company and its competitive position. All with strict confidence and may not be used at any time or in ay do with others in our Industry.
If you agree to the above to records. You may retain the	rms, please sign and return one copy of this letter for our e other copy for your files.
() I have additional agree () I do not have other agree	nents attached to this agreement.
Name:	
Address:	
SS. No.	
Independent Contractor: _	Date:
Company Representative	Date