

CONFIDENTIALITY AGREEMENT

I, the undersigned employee of Clarice Sattiewhite's Home, Inc. understand that, from time to time in the performance of my responsibilities and duties as a Company employee, I may become aware or have access to certain confidential information. Such confidential information may consist of trade secrets or proprietary information, which may include inventions, formulas, processes, techniques, data or software, belonging and having value to the Company or another entity or person under a contractual arrangement with the Company. Other such confidential information may consist of information concerning a person, whether an employee or otherwise, whether from a personnel record or a medical record or otherwise, and whether the confidentiality arises by reason of law, policy or civility.

In any event, I understand that certain disclosures of such confidential information to another would be a detriment to the respective interests of the Company, the entity and the person. I therefore agree that I will not disclose or allow or tolerate the disclosure of any confidential information to another except for the express purpose of and as necessary in the performance of my responsibilities and duties as a Company employee and then only according to Company guidelines and other written authorizations of the Company and the owner or subject of the information. I also agree that I will not carelessly, recklessly or willfully handle, manage or otherwise compromise the confidentiality of any confidential information. I will not use or allow or tolerate the use of any confidential information for my own benefit or for the benefit of a third party. Upon the termination of my employment with the Company, and at all other times as I may be directed by the Company, I will return to the Company all tangible, electronic or other forms of any confidential information in my possession or under my control.

I further understand that any act or failure to act contrary to the foregoing will subject me to civil remedies, criminal penalties and Company disciplinary proceedings, which may include loss of employment. I finally understand and agree that this Agreement is made in consideration of my employment with the Company and is effective during and at all times after such employment.

Dated this..... day of.....,

Employee's Name (Please Print):

Employee Signature.....**Date:**.....

Witnessing Supervisor Name (Please Print)

Witnessing Supervisor Signature.....**Date:**.....