

Please read and sign the Agreement attached to this Booklet and return it to Baxter with your submission as an indication of your approval of and adherence to Baxter's conditions and policies. If more than one party is making the submission, each party should read and sign a copy of a separate Agreement with all copies returned to Baxter with the submission as an indication of each party's approval of and adherence to Baxter's conditions and policies. We recommend that you also keep a copy of both this pamphlet and your Agreement in your files. Additional copies of the agreement can be downloaded from www.inventors-forum.net

Disclosure Agreement

NONCONFIDENTIAL DISCLOSURE AGREEMENT

(To be signed and submitted with a written description of your idea)

The following party (parties) _____

Desires(s) to disclose certain information to Baxter Healthcare Corporation ("Baxter") relating to _____

("the information").

The purpose of this disclosure is to enable Baxter to evaluate the information to ascertain Baxter's interest in this information. Baxter's policy regarding such disclosures as contained in the pamphlet, which was originally attached to this Agreement, has been read and understood by each of the above listed parties.

Particularly, it is understood that Baxter will review and consider the information only under the following terms and conditions:

1. The above listed party (parties) is (are) the true owner(s) of the information submitted to Baxter and no legal encumbrances prohibit disclosure of the information to Baxter.
2. Disclosure of the information to Baxter does not in any way establish any confidential relationship with Baxter regarding the information.
3. There is a further written agreement, which neither Baxter nor the above listed party (parties) is obliged to enter into, all rights and remedies arising out of the disclosure of the information to Baxter, or the use of the information by Baxter, are limited to rights and remedies under worldwide patent or copyright laws.
4. This document is the entire and complete agreement with Baxter regarding the information, and in order for any other obligations to arise from Baxter, it will be necessary to enter into a subsequent written contract with Baxter.

Agreed to by:

Baxter Healthcare Corporation

Signature _____

Name (printed) _____

Title _____

Date _____

Submitted by:

Signature _____

Name (printed) _____

Date _____

Address _____

Country _____

(_____)

Telephone No: _____

Fax No: _____

e-mail: _____