

IN THE MATTER OF THE ARBITRATION OF
JOHNNIEA ARMSTEAD, SANDRA MARSHALL, AVERRI LEMALLE, JOSEPH
PEARSON, ROLAND ROSS, JOHN SANDERS, KENNETH WILLIAMSON
on behalf of themselves and other similarly situated,

v.

INDUSTRIAL SECURITY SERVICES CORPORATION

CONSENT TO BECOME CLAIMANT

I understand that I may be eligible to join this lawsuit to recover unpaid wages and liquidated damages from ISSC.

By filing this Consent to join this suit, I understand that I designate the named Claimants identified in the above caption, hereinafter the "Representative Claimants," as my agents to make decisions on my behalf concerning Fair Labor Standards Act Litigation against ISSC, including the method and manner of conducting this litigation, entering into settlement agreements with Representative Claimants' counsel concerning attorneys' fees and costs, and all other matters pertaining to Fair Labor Standards Act Litigation against ISSC. These decisions and agreements, made and entered into by the Representative Claimants, will be binding on me if I file this Consent.

I understand that Representative Claimants have entered into a Contingency Fee Agreement with the law firms of Shellist ★ Lazarz LLP, and/or the Representative Claimants may in the future appoint other individuals to be Representative Claimants in Fair Labor Standards Act Litigation against ISSC. I hereby consent to such appointment and agree to be bound by the decisions of such new Representative Claimants for all purposes related to Fair Labor Standards Act Litigation against ISSC, including my Contingency Fee Agreement.

By choosing to file this Consent, I understand that I will be bound by the judgment, whether it is favorable or unfavorable. I will also be bound by, and will share in, as the Arbitrator may direct, any settlement that may be negotiated on behalf of all plaintiffs.

I acknowledge and understand that if I do not file this Consent, I will not be affected by any judgment or settlement rendered or reached in this lawsuit, whether favorable or unfavorable to the Representative Claimants, and I will not be entitled to share in any amounts recovered by the Representative Claimants whether by judgment, settlement, or otherwise.

I hereby consent to join this lawsuit.

Signature

Date

PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION:

Name: _____

Any other Name(s) you used or are known by:

Social Security Number: _____

Street Address: _____

Mailing Address: _____

City, State & ZIP Code: _____

Daytime Telephone: _____

Evening Telephone: _____

Cellular Telephone: _____

Alternate Telephone: _____

E-Mail Address: _____

Return this form to:

Overtime Lawsuit Against ISSC
Shellist ★ Lazarz LLP
3D/International Tower
1900 West Loop South, Suite 1910
Houston, Texas 77027
Facsimile: (713) 621-2277