

**PROMISSORY NOTE**

\$17,745.00

Clearwater, FL \_\_\_\_\_, 200\_\_

FOR VALUE RECEIVED, the undersigned hereby promises to pay to the order of MORTON PLANT MEASE HEALTH CARE, INC., or order, the principal sum of SEVENTEEN THOUSAND SEVEN HUNDRED FORTY-FIVE and 00/100 DOLLARS (\$17,745.00), at Clearwater, Florida, or at such other place as may be designated by the payee in writing, with no interest accruing thereon.

In the event the payee completes the work requirement referred to in the Work Agreement executed simultaneously with this Promissory Note, there will be no obligation to repay Morton Plant Mease Health Care, Inc. for the monies advanced to payee pursuant to the Work Agreement. In the event, however, the payee does not complete the work requirement, payee shall pay the principal sum of Seventeen Thousand Seven Hundred Forty-Five and 00/100 Dollars (\$17,745.00) in twelve (12) equal monthly payments so that the Promissory Note will have been paid in full twelve (12) months after termination of payee's employment.

If any of the said sums of money herein referred to be not promptly and fully paid within fifteen (15) days after the same become due and payable, the entire unpaid balance then due on this note shall become due and payable forthwith or thereafter at the option of the payees, their successors or assigns, as fully and completely as if the said aggregate sum of \$17,745 were originally stipulated to be paid on such day, anything in this note to the contrary notwithstanding.

If the holder of the Note has not received the full amount of any monthly payment within the 15-day calendar days after the same is due, the undersigned will pay a late charge to the holder in the amount of five (5%) percent on the late payment. The late charge shall be due only once on each late payment and shall be paid as a condition to reinstatement. Nothing contained herein shall entitle the makers hereto to reinstatement upon tender of delinquent payments and late charges after acceleration by the holder hereof.

Now, should it become necessary to collect this note through an attorney, either of us, whether maker, surety or endorser on this note, hereby agrees to pay all costs of collection, including a reasonable attorney's fee, and including any attorney's fee incurred by an appeal. The makers and endorsers severally waive presentment for payment, protest and notice of protest and non-payment of this note.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Social Security Number