



TESTIMONIAL FORM

Cealtec Product Inc. has in no way caused this testimonial on the performance of CealDoctor™ Self-healing Engine Treatments to be presented in a way to note the user of the product to make unreasonable or unethical statements concerning their personal or business experience by using the above product in their engine(s). This testimonial has been made as a result of the end user wishing to express either a personal or professional opinion or viewpoint, either negative or positive in nature.

Name: JASON MYHRE
Business Name (if applicable): _____
Address: 5836 FAIR WYND City DELTA
Province/State: B.C. Postal/ZIP Code V4K 5H1
Country: CANADA Phone number: 604 644 3069
Profession: BUS DRIVER Professional designation: _____

DESCRIPTION OF TREATED ENGINE

Engine(s) fuel type treated: Gasoline Diesel LNG Propane

Check Small Engine Motorcycle Vehicle Marine Equipment Power Plant

If applicable: Hours on engine _____ Mileage/Kilometers on engine _____

Extended description: _____

Where did you acquire the product: Sample Retailer Name of Vendor _____?

TESTIMONIAL

Check
Packaging: Poor Average Above Average Excellent
Instruction Brochure: Poor Average Above Average Excellent
Distributor website (www.cealdoctor.com): Poor Informative Excellent resource
Ease of installation/treatment: Poor Average Above Average Excellent
Reduced noise and vibration: Yes No Unsure Still monitoring
Reduced smoke: Yes No Unsure Still monitoring
Reduced fuel consumption: Yes by _____ % No Unsure Still monitoring
Assisted in passing AirCare and/or Emissions testing at Government Agency: Yes No Unsure

OVERALL COMMENTS / IMPRESSIONS of CealDoctor™ Self-healing Engine Treatment product:

THE ENGINE TREATMENT THAT I USED GAVE
MY ENGINE NEW LIFE. WITHIN A FEW DAYS
THE ENGINE FELT STRONGER, RESUVINATED.

Signature: [Signature] Date SEPT 12/12