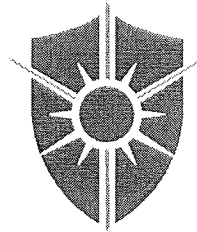
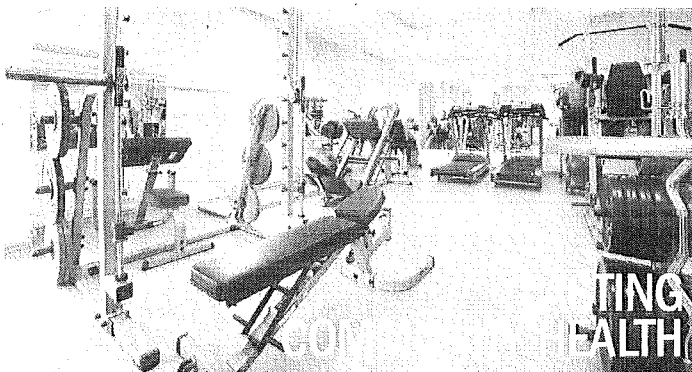
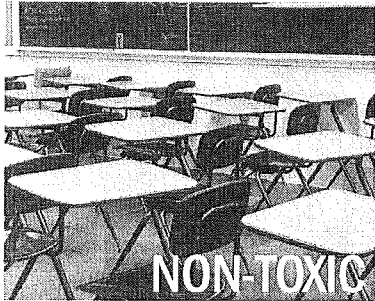


A cleaned surface only stays
disinfected until it's touched.

We have
the solution.



MonoFoil®

Protect your surfaces with
an antimicrobial shield
that lasts between cleanings.

MonoFoil's patented, EPA-approved, non-toxic antimicrobial nanotechnology is effective in killing 70+ strains of viruses, bacteria, mold, fungi and algae.

MonoFoil® creates an undetectable molecularly bonded polymer shield that provides proven sustained antimicrobial protection for 30+ days.

MonoFoil® is non-toxic, environmentally friendly, and hypoallergenic.

MonoFoil® is odorless, colorless and non-leeching.

MonoFoil® is made in the U.S.A.

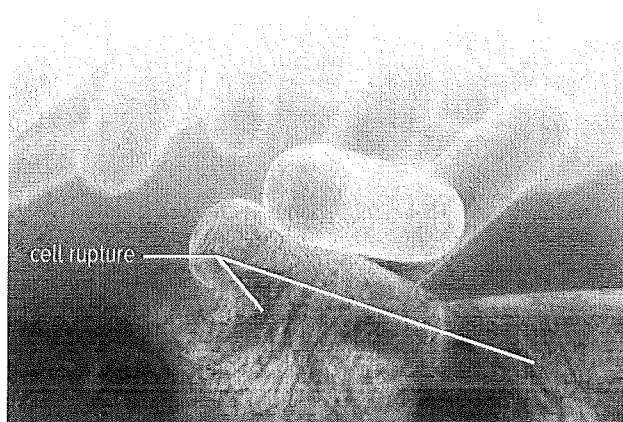
MonoFoil® is easy to apply, available in various sizes and can be used for small jobs to large industrial needs. Use with bottle sprayer, pressure sprayer or fogging equipment.



Stop Community Spread In Its Tracks

Community spread of germs occurs because current disinfectants are only active while the surface is wet. Once the liquid surface dries it quickly becomes re-contaminated upon contact.

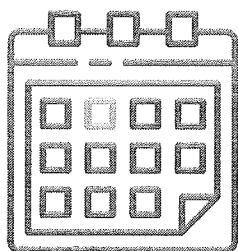
MonoFoil® bonds at a molecular level to surfaces, providing long lasting, durable antimicrobial protection unlike anything currently on the market.



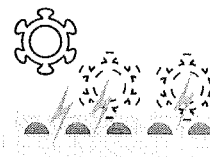
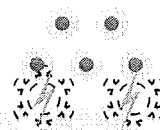
The active ingredient in MonoFoil® forms a colorless, odorless, positively charged polymer barrier that bonds to the applied surface. MonoFoil® is not metabolized by the microbial cells, instead it creates a network of electrically charged molecules on the surface, which rupture the cell wall on contact.

What does that really mean? It like popping a water balloon - it causes instant cellular death! Through this mechanism of action, MonoFoil® does not promote allow the microbe to mutate and the risk the formation of a resistant superbug.

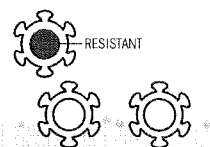
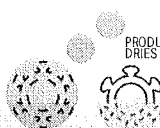
APPLY
ROUTINELY
FOR LASTING
PROTECTION



MonoFoil® creates an invisible electrically charged coating which bonds to the applied surface. MonoFoil® creates a long-lasting protective anti-bacterial shield that prevents new microbial contamination over 30 days.



Other disinfectants are designed to pass through the cell wall and attempt to poison the microbe altering the microbe's DNA. This may lead to mutation and resistant superbugs. These disinfectants are temporary and work while the surface is wet. Once surface is dry contamination occurs when the surface is touched again.

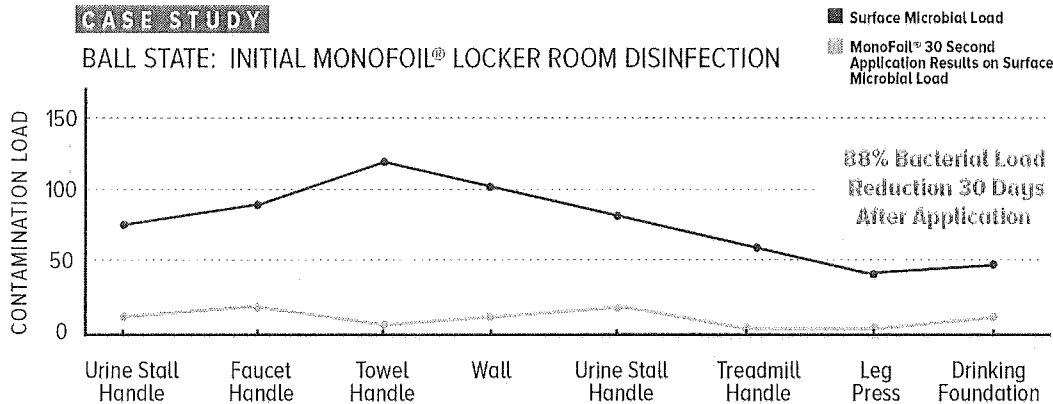




MonoFoil® is registered with the US Environmental Protection Agency and has successfully proven safety and antimicrobial disinfection against common community bacteria, viruses, and fungi.

CASE STUDY

BALL STATE: INITIAL MONOFOIL® LOCKER ROOM DISINFECTION



BALL STATE: 30 DAY SUSTAINABLE RESULTS

LOCATION	BASELINE	RETEST @ 30 DAY	OVERALL MICROBIAL REDUCTION
Urine Stall Handle	74	0	100%
Faucet Handle	85	10	88%
Towel Handle	107	7	93%
Wall	80	0	100%
Treadmill	50	22	56%
Leg Press	21	1	96%
Drinking Fountain	25	7	72%

AVERAGE MICROBIAL REDUCTION
88%
AT 30 DAYS

J. A Karel. *Durability of an Antimicrobial Polymer in Material Applications*. Department of Chemistry and Physics, Anderson University. May 01, 2013.

Results of the Clostridial Reinforced Media testing showed that MonoFoil® solutions are effective in inhibiting the growth of both *C. difficile* vegetative and endospore cells. Each of the solutions containing the QAC showed no growth after a 48-hour incubation time.



Every year at Marion University Sports Facility we would have reports of athletes with Staph or MRSA cases. Last year we had 10 athletes report with Staph. Since we started using MonoFoil over the past two years we have had zero Staph cases.
- Coach Ted Karas, Marion University (Fox59. July 19, 2017)

Effective Against

VIRUSES

HIV type 1- Strain HTLV IIIB
Herpes Simplex Type 1
Rotavirus
Coronavirus (ATCC VR-740)^{*}
Influenza A (H1N1)
Swine Influenza A (H1N1)
Adenovirus Type 2
Norovirus
Avian Influenza A
Rhinovirus
Hepatitis B Virus
Hepatitis C Virus

BACTERIA

Pseudomonas aeruginosa
Staphylococcus aureus
Salmonella enterica
Listeria monocytogenes
Enterococcus faecium
MRSA *Staphylococcus aureus*
Community Associated MRSA
Escherichia coli
Acinetobacter baumannii
Campylobacter jejuni
Klebsiella pneumoniae
Klebsiella pneumonia

FUNGUS

Trichophyton mentagrophytes
(Athlete's Foot Fungus)

^{*}Although all viruses contain similar metabolism, the new Coronavirus/COVID19 has not been evaluated at the time of this publication.

Treating Spaces Today To Protect Your People Tomorrow

MONOFOIL® WILL BENEFIT

Airports
Airplanes and Cruise Ships
Casinos
Bars and Night Clubs
Child Care Centers
Churches
Commercial Office Buildings
Convention Centers
Gyms and Locker Rooms
High Traffic Zones
Hospitals/Healthcare Facilities
Hotel & Resorts
Mass Transit
Medical/Dental Offices
Restaurants
Residential Homes
Stadiums and Arenas
Schools



Brands
that are
protecting
community
health with
Monofoil®

The MonoFoil® antimicrobial solution can be applied to a variety of surfaces to deliver lasting protection. MonoFoil® is non-toxic and can be applied to multiple areas such as: kitchen & bath surfaces, indoor/outdoor surfaces, plastic, stone and metal surfaces, fabric and carpet.

Everyday
protection
for high
touch
surfaces

Escalators & Elevators
Door Handles
Fitness Equipment
Floors
Gaming Equipment
Handrails
Indoor Play Sets
Sports Equipment
Keyboards
Kiosks/Exhibits
School Desks
Toilets, Sinks, Showers
Wall Switches
Workplace Desks
Passenger Seating
Patient Exam Tables
and more!

MonoFoil® is independently lab tested and EPA registered. The antimicrobial protection is non-toxic, leaves no residue, non-leeching and environmentally friendly,

The
WALT DISNEY
Company

M Metro
Los Angeles County Metropolitan
Transportation Authority

 St. Vincent

MTA
New York City
Transit



W Warren
Central
High
School

COMPARISON OF MONOFOIL® VS. LYSOL VS. BLEACH

	COST/ LITER	APPLICATION/ YEAR	# LITERS NEEDED/YEAR	ANNUAL COST	APPLICATION LABOR TIME	APPLICATION LABOR COST PER APPLICATION	ANNUAL COST FOR LABOR	DISINFECTION PROTECTION	VOC
MONOFOIL	\$21.41	12	2.25	\$48.17	10 mins	\$1.84	\$22.08	30-days+	no
LYSOL	\$11.90	365	22.8	\$271.32	10 mins	\$1.84	\$675.25	minutes	yes
BLEACH	\$.68	365	22.8	\$15.58	35 mins	\$6.45	\$2,354.25	minutes	yes

BASED ON 200 TREATED SQFT.

How much do I need?

WALL-TO-WALL COVERAGE
1 gallon per 1500 sqft.*

HIGH TOUCH AREAS ONLY
1 quart per 1000 sqft.*

*Method of application may cause product needed to vary

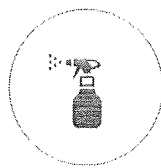
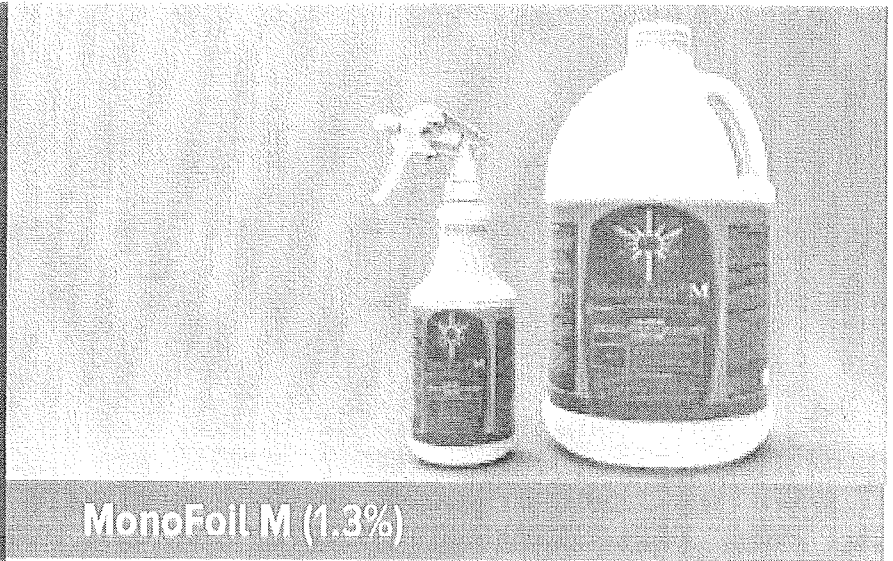
How is MonoFoil® Applied

MonoFoil® can be applied via spray bottle, pressurized sprayer, or placed into fogging equipment.

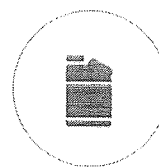
Recommended frequency of use is dependent on the surface being treated and the volume of human contact. It is strongly recommended to be applied at a minimum on a monthly basis.

Apply after normal dusting and dirt removal cleaning. Cleaning products will not remove MonoFoil® disinfectant barrier.

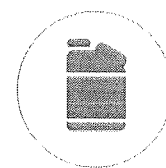
Please refer to MonoFoil product label for safety and handling information.



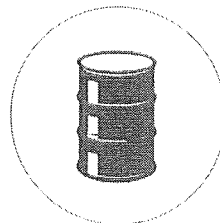
32 oz. Spray



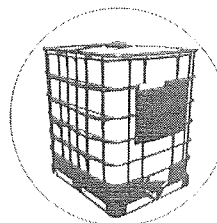
1 Gallon



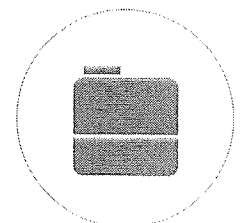
5 Gallon



55 Gallon Drum



330 Tote

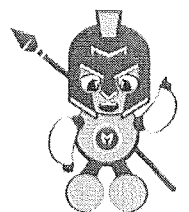


Custom

Custom product sizes available, Please contact us to inquire.
BULK ORDERS AVAILABLE

MonoFoil® Pro Services

MonoFoil® Pro provides professional MonoFoil® application services for commercial customers. Our program is designed around the client offering customized maintenance programs that will meet the needs of your facility. For more information about our professional application service, please contact us.





EFFICACY DATA for Product Central 105: Antimicrobial (MonoFoil® 1.3% Solution)

VIRUCIDAL DATA:

Protocols for Testing the Efficacy of Disinfectants against Hepatitis B Virus (HBV) (EPA, Federal Register, Vol. 65, No. 166, 8/25/2000, p. 51828).

Protocol for Testing Disinfectants against Hepatitis C Virus using Bovine Viral Diarrhea Virus as approved by the U.S. EPA on August 15, 2002.

U.S. E.P.A. Pesticide Assessment Guidelines, Subdivision G: Product Performance, 1982, Section 91-30, pp. 72-76.

Virucide Assay (EPA, Federal Register 10, No. 123, 6/25/75, p. 26836)

10 minute contact time, glass petri dish substrates, 18.5-25°C exposure temperature, tested in the presence of serum

Results:

<u>Test Organism</u>	<u>Sample</u>		<u>Titer Reduction</u>	
†Adenovirus Type 5	A	B	$\geq 3.0 \log_{10}$	$\geq 3.3 \log_{10}$
*Avian Influenza A/Turkey/Wisconsin (ATCC VR-798)	A	B	$\geq 5.5 \log_{10}$	$\geq 5.5 \log_{10}$
‡Bovine Viral Diarrhea Virus (BVDV)	A	B	$5.93 \log_{10}$	$5.93 \log_{10}$
*Hepatitis B Virus (HBV) (Duck Hepatitis B Virus- DHBV)	A	B	$4.68 \log_{10}$	$4.68 \log_{10}$
‡Hepatitis C Virus (HCV) (Bovine Viral Diarrhea Virus-BVDV)	A	B	$5.93 \log_{10}$	$5.93 \log_{10}$
†Herpes Simplex Type 1 (Sabin)	A	B	$4.0 \log_{10}$	$4.0 \log_{10}$
*Human Coronavirus (ATCC VR-740, strain 229E)	A	B	$\geq 4.25 \log_{10}$	$\geq 4.25 \log_{10}$
*Human Immunodeficiency Virus, HIV-1, strain HTLV- III _B , (associated with AIDS)	A	B	$\geq 3.5 \log_{10}$	$\geq 3.5 \log_{10}$
†Influenza A ₂ (Japan 305/57)	A	B	$7.5 \log_{10}$	$7.5 \log_{10}$
*Norovirus	A	B	$4.75 \log_{10}$	$\geq 4.75 \log_{10}$
*Newcastle Disease Virus (strain H.J. Roakin, 1946)	A	B	$\geq 5.5 \log_{10}$	$\geq 5.5 \log_{10}$
*SARS associated Coronavirus (ZeptoMetrix)	A	B	$4.03 \log_{10}$	$4.03 \log_{10}$
†Vaccinia (Wyeth)	A	B	$3.5 \log_{10}$	$3.5 \log_{10}$

Conclusion: Under the conditions of this investigation, MONOFOIL® 1.3% Solution was **virucidal** for Adenovirus Type 5, Avian Influenza A/Turkey/Wisconsin, Bovine Viral Diarrhea Virus (BVDV), Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), Herpes Simplex Type 1 (Sabin), Human Coronavirus, Human Immunodeficiency Virus (HIV-1), Influenza A₂ (Japan 305/57), Laryngotracheitis, Newcastle Disease Virus, SARS associated Coronavirus and Vaccinia (Wyeth) according to criteria established by the U. S. Environmental Protection Agency for registration and labeling of a disinfectant product as a virucide.



MonoFoilTM

SANITIZATION DATA:

Test Method: AOAC Germicidal and Detergent Sanitizing Action of Disinfectants

Test Conditions: synthetic hard water as 650 ppm hardness (as CaCO₃)

Results:

TOTAL BACTERIAL COUNTS/ % KILL vs. EXPOSURE TIME

Organism	30 seconds		% Kill†	60 seconds		Initial Inoculum	
	Sample	TBC*		TBC*	% Kill†	Control Count	
<i>Staphylococcus aureus</i> (ATCC 6538)	A	970	99.999	105	99.999	7.8 x 10 ⁷	
	B	1285	99.999	205	99.999	9.2 x 10 ⁷	
	C	1145	99.999	130	99.999	9.3 x 10 ⁷	
<i>Escherichia coli</i> (ATCC 11229)	A	1125	99.999	50	99.999	1.0 x 10 ⁸	
	B	1075	99.999	95	99.999	9.3 x 10 ⁷	
	C	835	99.999	75	99.999	8.1 x 10 ⁷	
<i>Campylobacter jejuni</i> (ATCC 29428)	A	790	99.999	410	99.999	8.6 x 10 ⁷	
	B	780	99.999	470	99.999	8.6 x 10 ⁷	
<i>Escherichia coli</i> O157:H7 (ATCC 43895)	A	1220	99.999	110	99.999	9.2 x 10 ⁷	
	B	1000	99.999	125	99.999	9.2 x 10 ⁷	
<i>Listeria monocytogenes</i> (ATCC 35152)	A	<10	>99.999	<10	>99.999	7.8 x 10 ⁸	
	B	<10	>99.999	<10	>99.999	7.8 x 10 ⁸	
Methicillin resistant <i>Staphylococcus aureus</i> (ATCC 33592)	A	950	99.999	<10	>99.999	1.0 x 10 ⁸	
	B	970	99.999	<10	>99.999	1.0 x 10 ⁸	
<i>Salmonella typhi</i> (ATCC 6539)	A	<10	>99.999	<10	>99.999	1.4 x 10 ⁸	
	B	<10	>99.999	<10	>99.999	1.4 x 10 ⁸	
<i>Shigella sonnei</i> (ATCC 11060)	A	680	99.999	<10	>99.999	9.3 x 10 ⁷	
	B	4500	99.999	<10	>99.999	9.3 x 10 ⁷	
Vancomycin resistant <i>Enterococcus faecalis</i> (ATCC 51299)	A	<10	>99.999	<10	>99.999	1.2 x 10 ⁸	
	B	<10	>99.999	<10	>99.999	1.2 x 10 ⁸	
<i>Vibrio cholera</i> (ATCC 14035)	A	<10	>99.999	<10	>99.999	8.3 x 10 ⁷	
	B	<10	>99.999	<10	>99.999	8.3 x 10 ⁷	
<i>Yersinia enterocolitica</i> (ATCC 23715)	A	108	99.999	<10	>99.999	1.7 x 10 ⁸	
	B	1300	99.999	263	99.999	5.9 x 10 ⁸	

*TBC = Total Bacterial Count, organisms/ml

Kill calculation based on Initial Inoculum Control Count.

Conclusion: Under the conditions of these investigations, MONOFOIL® 1.3% Solution demonstrated **sanitizing** activity against *Staphylococcus aureus*, *Escherichia coli*, *Campylobacter jejuni*, *Escherichia coli* O157:H7, *Listeria monocytogenes*, Methicillin resistant *Staphylococcus aureus*, *Salmonella typhi*, *Shigella sonnei*, Vancomycin resistant *Enterococcus faecalis*, *Vibrio cholera* and *Yersinia enterocolitica* according to criteria established by the U. S. Environmental Protection Agency



MonoFoil™

SANITIZATION DATA (continued):

Test Method: AOAC Germicidal and Detergent Sanitizing Action of Disinfectants

Test Conditions: synthetic hard water as **650 ppm** hardness (as CaCO₃)

Results:

TOTAL BACTERIAL COUNTS/
% KILL vs. EXPOSURE TIME

Organism	30 seconds	TBC*	% Kill†	60 seconds	% Kill†	Initial Inoculum
	Sample			TBC*		Control Count
<i>Klebsiella pneumoniae</i> (ATCC 4352)	A	100	99.999	<10	>99.999	9.4 x 10 ⁸
	B	310	99.999	<10	>99.999	9.4 x 10 ⁸

*TBC = Total Bacterial Count, organisms/ml

† Kill calculation based on Initial Inoculum Control Count.

Conclusion: Under the conditions of these investigations, MONOFOIL® 1.3% Solution demonstrated **sanitizing** activity against *Klebsiella pneumoniae* at 300 ppm quaternary concentration and 650 ppm water hardness according to criteria established by the U. S. Environmental Protection Agency for registration and labeling of a disinfectant product as a sanitizer.

Test Method: AOAC Germicidal and Detergent Sanitizing Action of Disinfectants

Test Conditions: synthetic hard water as **500 ppm** hardness (as CaCO₃)

Results:

TOTAL BACTERIAL COUNTS/
% KILL vs. EXPOSURE TIME

Organism	30 seconds	TBC*	% Kill†	60 seconds	% Kill†	Initial Inoculum
	Sample			TBC*		Control Count
<i>Klebsiella pneumoniae</i> (ATCC 4352)	A	340	99.999	<10	>99.999	1.1 x 10 ⁸
	B	190	99.999	<10	>99.999	1.1 x 10 ⁸

*TBC = Total Bacterial Count, organisms/ml

† Kill calculation based on Initial Inoculum Control Count.

Conclusion: Under the conditions of these investigations, MONOFOIL® 1.3% Solution demonstrated **sanitizing** activity against *Klebsiella pneumoniae* at 200 ppm quaternary concentration and 500 ppm water hardness according to criteria established by the U. S. Environmental Protection Agency for registration and labeling of a disinfectant product as a sanitizer.



MonoFoil™

DISINFECTION DATA:

Test Method: AOAC Use Dilution

Test Conditions: 5% organic soil load, 10 minute contact time, stainless steel carrier substrates
20°C exposure temperature

Results:

		Number of Carriers		
<u>Test Organism</u>	<u>Dilution</u>	<u>Sample</u>	<u>Exposed</u>	<u>Positive</u>
<i>Staphylococcus aureus</i> (ATCC 6538)	3 ounces/1 gallons	A	60	0
		B	60	0
<i>Salmonella enterica</i> (ATCC 10708)	3 ounces/1 gallons	A	60	0
		B	60	0
<i>Listeria monocytogenes</i> (ATCC 35152)	3 ounces/1 gallons	A	10	0
		B	10	0
<i>Yersinia enterocolitica</i> (ATCC 23715)	3 ounces/1 gallons	A	10	0
		B	10	0
<i>Pseudomonas aeruginosa</i> (ATCC 15442)	3.5 ounces/1 gallons	A	60	0
		B	60	0
<i>Staphylococcus aureus</i> (Vancomycin intermediate resistant) (VISA) (HIP-5836)	3.5 ounces/1 gallons	A	10	0
		B	10	0
<i>Xanthomonas axonopodis</i> (pathovar citri) (Citrus Canker) (USDA Permit No. 46190)	2.67 ounces/1 gallon	A	10	0
		B	10	0

Under the conditions of these investigations, MONOFOIL® 1.3% Solution demonstrated **disinfectant** activity against *Staphylococcus aureus*, *Salmonella enterica*, *Listeria monocytogenes*, *Yersinia enterocolitica*, *Pseudo-monas aeruginosa*, *Staphylococcus aureus* (Vancomycin intermediate resistant) (VISA), and *Xanthomonas axonopodis* pathovar *citri* (citrus canker) according to criteria established by the U. S. Environmental Protection Agency for registration and labeling of a disinfectant product as a bactericide.

The testing data is provided for informational use as to the effectiveness of the MonoFoil Antimicrobial product. The provided information does not reflect actual EPA label claims and makes no claims above and beyond the master label.



MonoFoil Antimicrobial

Comprehensive Product Testing Report

About the Company

MonoFoil USA, LLC (MUSA) is an innovative manufacturing, R&D based in Indiana. We produce several unique and cutting-edge product technologies for the public transportation, janitorial, hygiene and biological surface protectors, home and business cleaning supplies, and auto care industries. MUSA is currently working with these industries to offer proactive protection from bacteria, mold, and other microbes for both porous and non-porous surfaces.

MonoFoil Microbiostatic Antimicrobial Coating

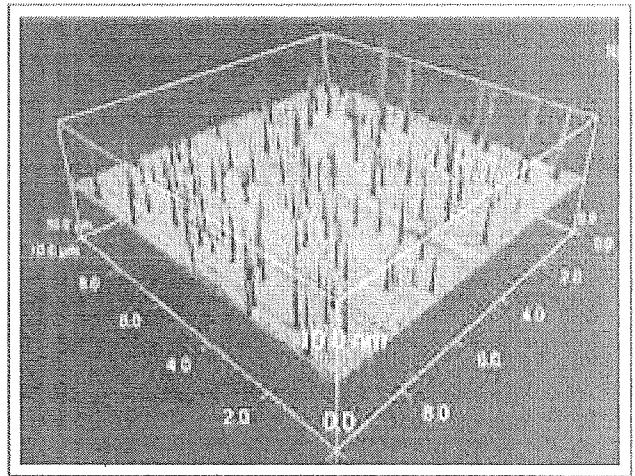
The Product

MUSA is pleased to introduce MonoFoil, a patented and Environmental Protection Agency (EPA) registered products. MUSA's Microbiostatic Antimicrobial Coating prevents the growth of a wide array of bacteria, mold, mildew, algae, and yeast. MonoFoil acts like a bed of micro-scopic spikes that pierce the cell walls of microbes offering a totally new approach to providing long-lasting antimicrobial protection.

How it Works

One end of the Monoil molecule creates a strong bond with a multitude of surfaces, both porous and non-porous, forming a highly durable protective coating. The other end of the molecule forms a microscopic bed of spikes that puncture microbes like a bed of nails. The MonoFoil Microbiostatic Antimicrobial Coating physically ruptures the cell walls of these microbes, without the use of poisons. Since the MonoFoil Microbiostatic Antimicrobial Coating methodology is mechanical instead of a poison, it does not create "super-bugs," which are microbes that build up a resistance to treatment.

Many years of research and development went in to the creation of the MonoFoil Microbiostatic Antimicrobial Coating. The technology has undergone extensive independent laboratory testing and has a long history of safe use. It is registered with the EPA for all applications in which it is used.



Overhead view of MonoFoil spikes (image ©2010 IDA)

Independent Lab Testing

Recently, MUSA was asked by the largest hospital environmental services company in the United States to verify the performance of our product in a hospital setting. Independent laboratory tests were ordered to confirm approved EPA claims (87538-2). The testing was performed by two different labs at three locations across the country selected by the hospital environmental services company.

Microbac Laboratories, Inc., an independent facility, conducted the testing for Hospital 1, located in Louisville, Kentucky, and Hospital 2, located in Columbus, Ohio. Chestnut Labs, also an independent facility, with offices in Springfield, Missouri, conducted the testing for Hospital 3, located in Joplin, Missouri. Two to three areas in each hospital including public areas such as the emergency room waiting area and inpatient rooms were evaluated with three to 19 points selected in each room. Swab tests were performed every 15 days over a three-month period in 2010. Each test was monitored by the environmental supervisor of the facility being tested. The swabs were categorized, put on ice and taken to the independent labs to determine the results.

The Hospitals


Hospital 1 is a teaching hospital located near downtown Louisville, Kentucky. The hospital's emergency room is one of the largest trauma facilities in the country and is able to accommodate up to 86 patients simultaneously. The center is staffed 24-hours a day and admits more than 2,400 patients each year; 40 percent of those are referred from other hospitals throughout the region. No patient numbers were readily available for the inpatient facilities.

As one of the largest and most comprehensive pediatric hospitals and research institutes in the United States, Hospital 2 is home to the department of pediatrics for a local university medical school. In a typical year, the hospital sees patients from across the country and around the world. Hospital 2 is located in Columbus, Ohio and maintains a medical staff of approximately 950, a hospital staff of 6,800, and delivers pediatric care for almost 823,000 patient visits annually.


Hospital 3, located in Joplin, Missouri, is also a teaching hospital and features a 404-bed, three-hospital system, which includes a comprehensive behavioral health center. The facility has recently completed a \$47 million expansion project. Hospital 3 is a member of the Oklahoma Osteopathic Medical Consortium of Oklahoma and the regional Osteopathic Postdoctoral Training Institution and an affiliate of Oklahoma State University-College of Medicine.

The Results - Hospital 1

As demonstrated on the following certified reports from Microbac Laboratories, a significant decrease in microbes in all areas treated and tested at Hospital 1 was found. In fact, the average decrease in harmful bacteria and microbes for the three rooms treated and tested at Hospital 1 was 97.85 percent!



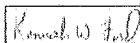
Microbac Laboratories, Inc.
 Kentucky Testing Laboratory Division
 3323 Gilmore Industrial Boulevard Louisville, KY 40213
 502/962-6400 Fax: 502/962-6411




Louisville, Kentucky, Treated Room: Emergency Room Waiting Area

Sample Number	Sample Description	Baseline 1/26/2010	Follow-up 2/10/2010	Follow-up 3/1/2010	Follow-up 3/15/2010	Follow-up 4/5/2010	Follow-up 4/22/2010	Follow-up 5/12/2010
001	ER Chair 1, Arms / Seat	980	30	70	<10	<10	80	<10
002	ER Chair 2, Fabric Only	2500	10	380 (1)	47000 (2)	41600	50	90
003	Soda Machine, Keypad	290	<10	30	39000 (2)	50	10	<10
004								
005								
006								
007								
008								
009								
010								
011								
012								
013								
014								


THIS REPORT HAS BEEN REVIEWED AND APPROVED FOR RELEASE
 (1) Upon arrival patient was sitting in chair
 (2) ER Waiting Area very active


 Kenneth W. Ford, Director

The results shown to the left from the Emergency Room Waiting Area of Hospital 1 show a significant decrease in microbes when compared to the baseline sample. Swab tests were conducted every 15 days from January 2010 to May 2010 on three surfaces including two chairs and the vending machine keypad. The total decrease in microbes from the baseline test to the last follow-up test for this room was 97.13 percent.



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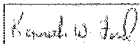


Louisville, Kentucky, Treated Room Floor 5, Room 4

Sample Number	Sample Description	Baseline 1/26/2010	Follow-up 2/10/2010	Follow-up 3/1/2010	Follow-up 3/15/2010	Follow-up 4/5/2010	Follow-up 4/22/2010	Follow-up 5/12/2010
001	TV Remote	990	10	10	10	380	340	10
002	Middle Wall Panel	1600	10	<10	<10	<10	10	10
003	Arm Rest of Chair	270	10	<10	<10	<10	40	(1)
004	Blood Pressure Bulb	130	20	<10	30	<10	40	<10
005	Night Light Switch	160	<10	10	<10	<10	20	<10
006	Counter Under Lip	70	<10	30	<10	<10	<10	<10
007	Drawer Handles	70	<10	<10	<10	<10	20	<10
008	Thermometer Blue Tip	60	<10	<10	<10	<10	20	(2)
009								
010								
011								
012								
013								
014								

(1) Chair not present in room
 (2) Thermometer not present in room

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 Kenneth W. Ford, Director

The results shown to the left from Room 4 on the 5th Floor of Hospital 1 also show a significant decline in microbes when compared to the baseline sample. Swab tests were conducted every 15 days from January 2010 to May 2010 on eight surfaces including the television remote, chair, blood pressure bulb, switch for the night light, drawer handles, thermometer, one wall panel, and underside of the counter lip. The decrease in microbes for this room was an astounding 99.95 percent!



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Louisville, Kentucky Treated Room Floor 9, Room 9								
Sample Number	Sample Description	Baseline 1/26/2010	Follow-up 2/10/2010	Follow-up 3/1/2010	Follow-up 3/15/2010	Follow-up 4/5/2010	Follow-up 4/22/2010	Follow-up 5/12/2010
001	Chair Fabric	160000	260	2100 (1)	1000	NA	(2)	NA
002	Handrail Bed	2900	450	20	850	NA		<10
003	TV Remote	1400	250	30	900	120		10
004	Bed Tray	980	240	NA	NA	NA		NA
005	IV Pole Standing	690	20	<10	770	NA		NA
006	IV Pole Ceiling Mount	450	<10	<10	560	<10		<10
007	Bed Controls	410	<10	<10	<10	NA		<10
008	Door Handle Outside	140	<10	<10	<10	10		10
009	Monitor Controls Frame	60	<10	<10	80	<10		10
010	Drawer handles	570	10	<10	60	<10		<10
011	Door Frame	90	10	<10	<10	<10	↓	10
012								
013								
014								

THIS REPORT HAS BEEN REVIEWED AND APPROVED FOR RELEASE

(1) Chair occupied upon arrival

(2) Room not available due to hospital emergency

Kenneth W. Ford

Kenneth W. Ford, Director

The results shown to the left from Room 9 on the 9th Floor of Hospital 1 continue to show a significant decrease in microbes when compared to the baseline sample. Swab tests were conducted every 15 days from January 2010 to May 2010 on 11 surfaces including the TV remote, chair, drawer handles, bed handrail, controls and tray, IV equipment, outside door handle and frame as well as the frame for the monitor controls. The decrease in microbes for this room was 96.47 percent.

Room	Baseline	Last Follow-Up	Total % Decrease
Emergency Room Waiting Area	3770	108	97.13%
Floor 5, Room 4	3290	116	96.47%
Floor 9, Room 9	167730	76	99.95%

The chart above outlines the data for the baseline and final follow-up testing as well as the total percentage of decrease in microbes for each room tested in Hospital 1.

The Results - Hospital 2

As demonstrated on the following certified reports from Microbac Laboratories, a significant decrease in microbes in all areas treated and tested at Hospital 2 was found. The average decrease in harmful bacteria and microbes for the two rooms treated and tested at Hospital 2 was 68.44 percent. This result is lower than generally found in Hospitals 1 and 3. The difference is explained by the notes on the Microbac Laboratories results certificate. Microbac determined the baseline data presented by the previous laboratory was invalid due to poor quality standards. Therefore, calculations for percentage of decrease were completed using the data from the first follow-up rather than the baseline.



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Columbus, Ohio, Treated Room 4009

Sample Number	Sample Description	Baseline 1/26/2010	Follow-up 2/10/2010	Follow-up 3/1/2010	Follow-up 3/15/2010	Follow-up 4/5/2010	Follow-up 4/22/2010	Follow-up 5/12/2010
001	Sink handle	***	200	4000	60	<10	<10	<10
002	Telephone		<10	<10	70	<10	<10	<10
003	Wall by Towel Dispenser		<10	10	<10	<10	<10	<10
004	Drawer handles		20	<10	<10	<10	<10	20
005	Chair		<10	30	1200	<10	(1)	10
006	Entry Door Handle Outside		<10	<10	<10	<10	20	<10
007	Sink Drain		30	3400	4400	<10	<10	<10
008	Light switch		<10	20	<10	<10	<10	<10
009	Sanitizer Housing by Sink		30	<10	10	<10	<10	<10
010	Black Spotlight Handles		<10	<10	<10	<10	<10	<10
011	VCR / Radio / CD Controls		<10	<10	20	<10	<10	<10
012	Thermostat		90	10	150	<10	(2)	10
013	Bottom of Towel Dispenser		<10	<10	<10	<10	<10	<10
014	Door Frame		<10	<10	380	<10	<10	<10
015	Wall Area at Bottom of Bed		30	10	<10	<10	40	<10
016	TV Remote		<10	<10	50	<10	10	<10
017	Nurses Call Button on Wall		<10	10	<10	<10	80	10

*** All baseline testing invalidated due to previous labs quality control. Use Control room A6633 for baseline comparisons.

(1) Chair removed from room

(2) Thermostat not accessible due to patient positioning

THIS REPORT HAS BEEN REVIEWED AND APPROVED FOR RELEASE.

Kenneth W. Ford

Kenneth W. Ford, Director

The results shown to the left from Room 4009 at Hospital 2 show a significant decrease in microbes. Swab tests were conducted every 15 days from January 2010 to May 2010 on 17 surfaces including the sink handle and drain, telephone, walls, drawer handles, chair, light switch, VCR/Radio/CD controls, door frame, television remote, and the nurse call button. The percentage of decrease in microbes from the first follow-up to the last follow-up test was 66.53 percent.



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Columbus, Ohio, Treated Room 4029

Sample Number	Sample Description	Baseline 1/26/2010	Follow-up 2/10/2010	Follow-up 3/1/2010	Follow-up 3/15/2010	Follow-up 4/5/2010	Follow-up 4/22/2010	Follow-up 5/12/2010
001	Door handle	***	<10	<10	<10	<10	20	<10
002	Sink handle		<10	<10	<10	<10	10	<10
003	Drawer handles		20	<10	<10	<10	50	<10
004	Light switch by sink		<10	<10	<10	<10	<10	<10
005	Phone		20	<10	30	<10	<10	180
006	TV Remote		<10	<10	10	<10	<10	10
007	Countertop		10	10	<10	<10	<10	<10
008	Toilet handle		790	850	470	3,000	<10	<10
009	Chair		30	<10	20	<10	<10	<10
010	Sanitizer housing		<10	<10	<10	<10	<10	<10
011	Sink drain		20	<10	4,200	1,500	<10	<10
012	Wall towel dispenser		<10	<10	<10	<10	<10	<10
013								
014								

*** All baseline testing invalidated due to previous labs quality control. Use Control room A6633 for baseline comparisons.

Kenneth W. Ford

Kenneth W. Ford, Director

The results shown to the left from Room 4029 at Hospital 2 show a significant decrease in microbes. Swab tests were conducted every 15 days from January 2010 to May 2010 on 14 surfaces including the sink handle and drain, door handles, light switch, phone, toilet handle, television remote, chair, drawer handles, countertop and wall towel dispenser. The percentage of decrease in microbes from the first follow-up to the last follow-up test was 70.34 percent.

Hospital 2 Continued

Room	First Follow-Up	Last Follow-Up	Total % Decrease
Room 4009	499	167	66.53%
Room 4029	944	280	70.34%

The chart above outlines the data for the first and last follow-up testing as well as the total percentage of decrease in microbes for each room tested in Hospital 2.

The Results - Hospital 3

As demonstrated on the following certified reports from Chestnut Labs, a significant decrease in microbes in all areas treated and tested at Hospital 3 was found. In fact, the average decrease in harmful bacteria and microbes for the two rooms treated and tested at Hospital 3 was an astounding 99.84 percent!

CHESTNUT LABS CERTIFIED REPORT									
Hospital 3, Room 272									
Room Number	Sample Description	Baseline 2/10/10	Follow-up 2/15/10	Follow-up 3/10/10	Follow-up 3/15/10	Follow-up 3/20/10	Follow-up 3/25/10	Follow-up 3/30/10	Follow-up 4/5/10
01-1	Bed rail control	150	10	10	10	10	10	10	10
01-2	Television control	150	10	10	10	10	10	10	10
01-3	Sink counter	150	10	10	10	10	10	10	10
01-4	Monitor controls	150	10	10	10	10	10	10	10
01-5	Light switch	150	10	10	10	10	10	10	10
01-6	Privacy curtain	150	10	10	10	10	10	10	10
01-7	Bed tray	150	10	10	10	10	10	10	10
01-8	Sliding door handle	150	10	10	10	10	10	10	10
01-9	Chart holder	150	10	10	10	10	10	10	10
01-10	Windowsill	150	10	10	10	10	10	10	10
01-11	Bed rail	150	10	10	10	10	10	10	10
01-12	Television	150	10	10	10	10	10	10	10
01-13	Monitor	150	10	10	10	10	10	10	10
01-14	Light switch	150	10	10	10	10	10	10	10
01-15	Privacy curtain	150	10	10	10	10	10	10	10
01-16	Bed tray	150	10	10	10	10	10	10	10
01-17	Sliding door handle	150	10	10	10	10	10	10	10
01-18	Chart holder	150	10	10	10	10	10	10	10
01-19	Windowsill	150	10	10	10	10	10	10	10
01-20	Bed rail	150	10	10	10	10	10	10	10
01-21	Television	150	10	10	10	10	10	10	10
01-22	Monitor	150	10	10	10	10	10	10	10
01-23	Light switch	150	10	10	10	10	10	10	10
01-24	Privacy curtain	150	10	10	10	10	10	10	10
01-25	Bed tray	150	10	10	10	10	10	10	10
01-26	Sliding door handle	150	10	10	10	10	10	10	10
01-27	Chart holder	150	10	10	10	10	10	10	10
01-28	Windowsill	150	10	10	10	10	10	10	10
01-29	Bed rail	150	10	10	10	10	10	10	10
01-30	Television	150	10	10	10	10	10	10	10
01-31	Monitor	150	10	10	10	10	10	10	10
01-32	Light switch	150	10	10	10	10	10	10	10
01-33	Privacy curtain	150	10	10	10	10	10	10	10
01-34	Bed tray	150	10	10	10	10	10	10	10
01-35	Sliding door handle	150	10	10	10	10	10	10	10
01-36	Chart holder	150	10	10	10	10	10	10	10
01-37	Windowsill	150	10	10	10	10	10	10	10
01-38	Bed rail	150	10	10	10	10	10	10	10
01-39	Television	150	10	10	10	10	10	10	10
01-40	Monitor	150	10	10	10	10	10	10	10
01-41	Light switch	150	10	10	10	10	10	10	10
01-42	Privacy curtain	150	10	10	10	10	10	10	10
01-43	Bed tray	150	10	10	10	10	10	10	10
01-44	Sliding door handle	150	10	10	10	10	10	10	10
01-45	Chart holder	150	10	10	10	10	10	10	10
01-46	Windowsill	150	10	10	10	10	10	10	10
01-47	Bed rail	150	10	10	10	10	10	10	10
01-48	Television	150	10	10	10	10	10	10	10
01-49	Monitor	150	10	10	10	10	10	10	10
01-50	Light switch	150	10	10	10	10	10	10	10
01-51	Privacy curtain	150	10	10	10	10	10	10	10
01-52	Bed tray	150	10	10	10	10	10	10	10
01-53	Sliding door handle	150	10	10	10	10	10	10	10
01-54	Chart holder	150	10	10	10	10	10	10	10
01-55	Windowsill	150	10	10	10	10	10	10	10
01-56	Bed rail	150	10	10	10	10	10	10	10
01-57	Television	150	10	10	10	10	10	10	10
01-58	Monitor	150	10	10	10	10	10	10	10
01-59	Light switch	150	10	10	10	10	10	10	10
01-60	Privacy curtain	150	10	10	10	10	10	10	10
01-61	Bed tray	150	10	10	10	10	10	10	10
01-62	Sliding door handle	150	10	10	10	10	10	10	10
01-63	Chart holder	150	10	10	10	10	10	10	10
01-64	Windowsill	150	10	10	10	10	10	10	10
01-65	Bed rail	150	10	10	10	10	10	10	10
01-66	Television	150	10	10	10	10	10	10	10
01-67	Monitor	150	10	10	10	10	10	10	10
01-68	Light switch	150	10	10	10	10	10	10	10
01-69	Privacy curtain	150	10	10	10	10	10	10	10
01-70	Bed tray	150	10	10	10	10	10	10	10
01-71	Sliding door handle	150	10	10	10	10	10	10	10
01-72	Chart holder	150	10	10	10	10	10	10	10
01-73	Windowsill	150	10	10	10	10	10	10	10
01-74	Bed rail	150	10	10	10	10	10	10	10
01-75	Television	150	10	10	10	10	10	10	10
01-76	Monitor	150	10	10	10	10	10	10	10
01-77	Light switch	150	10	10	10	10	10	10	10
01-78	Privacy curtain	150	10	10	10	10	10	10	10
01-79	Bed tray	150	10	10	10	10	10	10	10
01-80	Sliding door handle	150	10	10	10	10	10	10	10
01-81	Chart holder	150	10	10	10	10	10	10	10
01-82	Windowsill	150	10	10	10	10	10	10	10
01-83	Bed rail	150	10	10	10	10	10	10	10
01-84	Television	150	10	10	10	10	10	10	10
01-85	Monitor	150	10	10	10	10	10	10	10
01-86	Light switch	150	10	10	10	10	10	10	10
01-87	Privacy curtain	150	10	10	10	10	10	10	10
01-88	Bed tray	150	10	10	10	10	10	10	10
01-89	Sliding door handle	150	10	10	10	10	10	10	10
01-90	Chart holder	150	10	10	10	10	10	10	10
01-91	Windowsill	150	10	10	10	10	10	10	10
01-92	Bed rail	150	10	10	10	10	10	10	10
01-93	Television	150	10	10	10	10	10	10	10
01-94	Monitor	150	10	10	10	10	10	10	10
01-95	Light switch	150	10	10	10	10	10	10	10
01-96	Privacy curtain	150	10	10	10	10	10	10	10
01-97	Bed tray	150	10	10	10	10	10	10	10
01-98	Sliding door handle	150	10	10	10	10	10	10	10
01-99	Chart holder	150	10	10	10	10	10	10	10
01-100	Windowsill	150	10	10	10	10	10	10	10

The results shown above from Room 272 at Hospital 3 show a significant decrease in microbes. Swab tests were conducted every 15 days from February 2010 to June 2010 on 19 surfaces including the bed rail controls, television control, sink counter, monitor controls, light switch, closet door handle, privacy curtain, toilet surround and handle, chair, bed tray, sliding door handle, chart holder, and windowsill. The microbes in this room decreased by 99.87 percent!

The results shown above from Room 273 at Hospital 3 also show a significant decrease in microbes. Once again, swab tests were conducted every 15 days from February 2010 to June 2010 on 19 surfaces including the bed rail controls, television control, sink counter, monitor controls, light switch, closet door handle, privacy curtain, toilet surround and handle, chair, bed tray, sliding door handle, chart holder, and windowsill. The microbes in this room decreased by 99.81 percent!

Hospital 3 Continued

Room	Baseline	Last Follow-Up	Total % Decrease
Room 272	205830	277	99.87%
Room 273	103940	193	99.81%

The chart above outlines the data for the baseline and final follow-up testing as well as the total percentage of decrease in microbes for each room tested in Hospital 3.

Final Conclusions

All antimicrobials are not created equal. It's important to understand the basic chemical, physical, and biological properties of an antimicrobial so the best choice can be made. Because of its unique mode of action and inability to migrate from a treated surface, our technology is the obvious choice to minimize environmental contamination and the development of resistant organisms.

Our EPA approved products are safe for the environment, humans, and pets. They are non-dissipating, non-leaching, non-migrating from the applied substrate and cannot be absorbed by micro-organisms or by humans.

The results presented in this report support IDA's claims regarding its MonoFoil Microbiostatic Antimicrobial Coating. Independent laboratory tests from three hospitals in three states show the product to be extremely effective at decreasing the amount of bacteria and other microbes on both porous and non-porous surfaces.

For more information regarding MonoFoil Microbiostatic Antimicrobial Coating, please visit our website at www.monofoilclean.com.