CLIENT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGREES TO PAY AS FOLLOWS:

Flat fee per phase of Divorce proceeding:

\_\_\_\_\_\_\_\_ Filing to PPC/TOA: $2,5000.00, along with the expense deposit, is paid as full attorney fees from the initial drafting, filing, and through the obtainment of a Temporary Order. Work will cease until payment of next phase.

\_\_\_\_\_\_\_ Post TOA, Discovery, Mediation, Settlement: $3,000.00. After the PPC/TOA is reached this phase will include work on discovery (not to include depositions), conducting mediation and all work through settlement of case without trial. Work will cease

 \_\_\_\_\_ Deposition fees: If depositions are required to be taken or defended then that is billed at $250.00 per hour plus the court report costs. Prior to setting or defending a deposition a retainer of $1,500 is required.

\_\_\_\_\_\_\_ Pre Trial and Trial Prior to the case being set for pretrial the $2,500 will need to be paid. This amount represents a 1/2 day trial, $3,500 for 1 day trial, $5,000 for 1 ½ day trial and $6,000 for 2 day trial. If the trial will be longer than 2 days then additional fees will be charged at $1,250 per ½ day of additional trial work.

Payments will be made via credit/debt card. Client agrees and authorizes this office to charge said credit/debit card on the due date each month without prior notice to client and client agrees there will be sufficient funds for payment on that date. Any fees incurred due to client having insufficient funds shall be charged to and the responsibility of the client. Processing fees will be charged to the client. THERE ARE NO FEES FOR ECHECK PAYMENTS MADE THROUGH MYCASE.

\_\_\_\_\_\_ Expenses and filing fees: An initial cost deposit of $500.00 is required. Attorney will not advance filing fees or expenses. Client must ensure there is sufficient funds in the trust account to cover all expenses including but not limited filing fees, deposition fees, court report fees, fees for subpoena and document production, and witness fees. (Initial) Upon completion of the case any deposit remaining will be taken as payment of attorney fees.

\_\_\_\_\_\_\_ Additional Fees: The following issues will be handled at the following rate.

 \_\_\_\_\_ Protective Orders $1,5000 due prior to the hearing.

 \_\_\_\_\_ Qualified Domestic Relations Orders $1,5000 due prior to drafting.

AGREED TO AND ACCEPTED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hello and welcome to Hood And Barnett, PLLC. As a client, we ask that you please provide the following personal information. Please be sure that the information you provide is accurate and complete for it will be used to inform you of the status of your interests and/or changes that have or will be made. As always, thank you for your interest in our firm.

PERSONAL INFORMATION

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OPPOSING PARTY INFORMATION

Spouse Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work No.:\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature