



Erica Denise Moore, Esquire
Attorney at Law

FEE AGREEMENT

ATTORNEY'S FEES

The attorney's fee in this matter will be set as follows:

- Fixed Fee of \$_____
- Hourly Rate at \$____ per hour plus ____% of amount* recovered saved
- Estimated Fee in the range of: \$_____ to \$_____
- Contingent Fee of _____ saved recovered other *Contingent contract and Statement of Client's Rights signed as required
- Fee determined on all relevant factors
- Minimum retainer of \$_____
- Number of hours of attorney time covered by retainer is: _____
- Other: _____

This office will bill you:

- Monthly on _____ of each month
- Upon completion
- Other arrangement _____

ALL BILLS ARE PAYABLE UPON RECEIPT. IF YOU DO NOT PAY WITHIN 30 DAYS OF RECEIPT, YOUR ACCOUNT WILL BEGIN TO ACCRUE INTEREST CHARGES.

RETAINERS

Retainer of \$ _____ is to be applied:

- towards fee and out-of-pocket expenses
- towards fee
- towards out-of-pocket expenses
- Retainer is refundable
- Retainer is nonrefundable



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COSTS AND EXPENSES

Typical out-of-pocket expenses (NOTE: these are not attorney fees) for this matter may include:

- Costs such as court costs, filing fees, process server fees, deposition costs, sheriff or clerk of court fees, investigator's fees, etc.
- Abstracting charges or title insurance premiums, clerk's recording fees.
- Photocopying, scanning, conferencing, postage, and travel costs.
- Other: _____
- Estimate for costs and expenses (not including attorney's fees): _____
- Expected to range between \$_____ and \$_____ .
- Not expected to exceed \$_____.
- No expenses expected.

NOTE: This is an estimate for your convenience; it is not a guarantee.

If the above properly sets forth our agreement, please sign below and keep one copy. Return the original together with your check in the amount of \$ _____.

We will draw \$ _____ towards attorney fees and apply \$ _____ towards out-of-pocket expenses as outlined above. If we do not receive the signed original of this agreement (you retain the copy), and your check within ___ days, we shall assume that you have obtained other counsel and shall mark our file "CLOSED" and do nothing further. Thank you.

DATED THIS _____ day of _____, 20____.

[Attorney's Printed Name]

[Attorney's Signature]

THE ABOVE IS UNDERSTOOD AND AGREED BY ME:

DATED THIS _____ day of _____, 20____.

[Client's Printed Name]

[Client's Signature]