SAMPLE ADMINISTRATIVE FORM

REPRESENTATION LETTER

[Date]

[Client Name]

[Street]

[City / State / Zip Code]

Re: Legal Representation (Non-Litigation)

Dear [Client Name]:

We understand that you desire to have our firm represent you as your attorneys in (the matter name). Our representation under this Agreement is effective on our acceptance of employment.

We require an initial advance fee of $ \_\_\_\_\_\_ (optional) before we review the necessary information and documents or take any action related to this representation. All advance fees will be deposited in the firm’s trust account and will be applied toward the fees and costs incurred in this matter. We will bill against the advance fees on a monthly basis; however, you will be billed for any fees and costs that exceed the advance fee. We may also require that you maintain a minimum balance in our trust account at all times. On completion of our representation, any excess will be refunded to you by the firm.

The firm will bill you at the firm’s standard hourly rates for attorneys, which currently range from $\_\_\_\_\_\_ to $\_\_\_\_\_\_. We will also use law clerks and paralegals where possible; their hourly rates currently range from $\_\_\_\_\_ to $\_\_\_\_\_. If these rates change, we will notify you thirty (30) days in advance. Hourly time charges include, but are not limited to: court appearances, telephone conferences, office conferences, legal research, depositions, review of file materials and documents sent and received; preparation for trials, hearings, depositions and conferences; and drafting of pleadings, instruments, office memoranda and correspondence. We estimate, but cannot guarantee, that legal fees will be in the range of $\_\_\_\_\_\_ to $\_\_\_\_\_\_\_ for this matter. However, it is impossible to determine in advance the amount of time that will be needed to complete your case.

Additionally, you will be responsible for all costs incurred on your behalf which typically include court costs, deposition costs, travel expenses, and standard office costs such as postage, copying, scanning, and conferencing charges, as well as other costs incurred in this matter.

 The firm will bill you on a monthly basis and payment is due on receipt of our statement. Please make your checks payable to [firm name]. Any unpaid balance that remains outstanding \_\_\_\_\_\_ (\_\_\_) days after the date of our statement for services will accrue interest at an annual rate of \_\_\_\_\_\_\_\_ percent (\_\_%) on the unpaid balance. If our fees are not paid timely, we will terminate our services and move to withdraw from any proceeding or case then pending. We will assert a lien on all of your documents, property, or money in our possession for the payment of all sums due us from you under the terms of this Agreement.

The following factors will be considered as guides when determining the reasonableness of fees for legal services: (1) the time and labor required, the novelty and difficulty of the questions involved and the skill requisite to perform the legal services properly; (2) the fee customarily charged in the locality for similar services; (3) the amount involved and the results obtained; (4) the time limitations imposed by you or by the circumstances; (5) the nature and length of the professional relationship with you; and (6) the experience, reputation and ability of the attorneys performing the services.

If this letter accurately reflects our understanding, please sign the original and return it to our office along with the initial advance fee. A copy of this letter is enclosed for your records. Unless and until we receive the signed copy of this letter, along with the full initial advance fee, we may elect not to undertake any work on your behalf.

Your cooperation in this matter is very important. You must keep us informed of all relevant facts and circumstances and respond promptly to all papers sent to you.

We look forward to working with you on this matter. Please do not hesitate to give us a call at any time should you have any comments or questions about our representation.

Sincerely,

[Lawyer Signature]

[Firm Name]

**ACKNOWLEDGMENT OF DESIRE TO EMPLOY FIRM**

I understand and agree to the terms set forth above and employ your services under this agreement and authorize you to use our/my funds held in your trust account for attorneys’ fees and costs incurred during your representation.

DATED THIS \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Client’s Printed Name] [Client’s Signature]

**ACCEPTANCE OF EMPLOYMENT BY FIRM**

DATED THIS \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

[FIRM NAME]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Attorney’s Printed Name] [Attorney’s Signature]