## Douglas S. Tingvall

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## New Client/Matter Information and Agreement

Client Name:			
Primary Contact Person:			
Address:			
City, State, Zip:			
Preferred method(s) of communication:			
e-mail address:			
Work:			
Fax:	Other: _		
Matter:			
Insurance carrier (if applicable):			
Opposing counsel (if applicable):			
Authorized decision-makers:			
Other authorized contacts:			
Special instructions:			
For office use only: Client	Mat	ter	

## Terms of Representation

By submitting this information, you are requesting to retain me as your attorney in connection with the above-referenced matter. No attorney-client relationship is created until I check for conflicts of interest and I agree to represent you. I may require an initial advance fee deposit, which will be held in my trust account until earned, pursuant to WSBA Formal Opinion 186. My services will be billed at the rate of \$275/hour in increments of tenths of an hour with a minimum of two-tenths of an hour for each item. This rate is subject to change upon 30 days' notice. A 25% surcharge is imposed for services requested by you outside of normal business hours (Monday through Friday, 8:30 a.m. to 5:30 p.m.). Travel and standby time in excess of one hour is billed at onehalf the regular hourly rate. These fees do not include out-of-pocket disbursements, including, but not limited to, filing fees, court fees, process servers, witness fees, court reporters, long-distance telephone calls, travel, mileage (billed at the IRS rate), parking, and photocopies and incoming faxes (billed at \$0.15 per page) normally made by me or requested by you. I will prepare and send to you on a monthly basis accurate records of my time and expenses commencing from the initial conference. Invoices shall be payable within 15 days and shall accrue interest thereafter at the rate applicable to judgments. If you should decide to discontinue my services in this matter at any time, you shall be liable for fees and disbursements incurred before termination.

By providing your e-mail address, phone, fax and/or mobile phone numbers in the New Client/Matter Information on the previous page, you are authorizing me to communicate with you by those methods. It is your responsibility to secure and protect privileged communications received from me. If you do not want to receive privileged communications via e-mail, phone, fax and/or mobile phone, then do not provide such contact information.

raccept the above terms.		
Client:	Date:	