ATTORNEY REPRESENTATION AGREEMENT

I hereby retain and employ [redacted] as my Attorneys to represent me, and act on my behalf and in my best interest, for all claims and/or causes of action against those legally responsible for damages suffered by me or caused by the tort of others. When I began to slow down and come to a complete stop, the driver behind me ran into the back of my car. Since the accident,

**Attorney Fees:** [redacted] will be entitled to receive 35% of any recovery before the filing of a complaint or the appointment of arbitrators; After the filing of a complaint or appointment of arbitrators, the attorney fee percentage will increase to 40%; and if the case goes to trial or before a tribunal then the attorney fees will increase to 45%. This Attorney Fee shall be calculated on the gross recovery from any form of recovery obtained and shall be calculated on the gross recovery and deducted before any case related expenses or proceeds are deducted.

**No Fee for Property Damage:** [redacted] does not charge a fee for any property damage recovery, in order to increase the chances that the client will receive a greater recovery amount.

**No Recovery No Fee:** I understand that I will NOT be responsible for any Attorney Fees or reimbursement of Attorney’s expenses if there is no recovery in this matter.

**Your Case Prosecution Expenses:** Expenses related to this matter shall be advanced on my behalf by [redacted] and I understand I will be responsible for reimbursing [redacted] out of my portion of the recovery, all reasonable and necessary expenses incurred in the prosecution of my case with $250 being a base amount for prosecution expenses charged in all cases to cover general prosecution expenses including, but not limited to, long distance calls, photocopying, travel, facsimiles, postage for letters, file opening and other non-extraordinary expenses. Any other additional prosecution expenses may be added to the base amount only if it is the type of extraordinary prosecution expense that produces a separately identifiable cost such as an itemized receipt for its cost.

**Liens and Attorney Protects:** All liens including, but not limited to, medical liens, child support liens, and medical bills held under an Attorney Protect shall first be satisfied out of any Client recovery.

**Authorization:** Attorneys, their agents, and employers/employees are authorized to take all steps deemed by them to be necessary and appropriate to obtain a satisfactory result, including but not limited to securing a complete investigation; instituting legal proceedings; employing consultants, expert witnesses, and associate counsel; financing the costs of litigation using a third party to be repaid with interest from the recovery in this matter; signing checks in the client’s name; signing a release from liability in the name of the client after a case has been resolved; and Attorneys shall have full power and authority to settle the case, if client verbally agrees, or take such action as Attorneys might deem proper for the best interest of client; order medical records and sign a HIPAA release, and client does hereby appoint Attorneys as Client’s attorneys-in-fact, with full power to execute any and all instruments or documents in behalf of or in the name of client which are necessary to further, settle or make other disposition of the subject matter of this engagement and to deposit any checks or other form of recovery into Attorney’s bank account.

By Signing this Agreement I hereby acknowledge that I have reviewed this document and fully understand the terms and conditions before execution. I agree that a copy of this document shall be treated the same as if it were the original.

EXECUTED THIS DATE 1/11/2019

[Signature] [Signature]