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AUTHORITY TO REPRESENT

The undersigned client does hereby retain and employ the:

LAW OFFICE OF CHAD A. BARR, P.A.

as his/her attorneys to represent him/her in a claim for damages against _____,
or any other person, firm or corporation liable therefore, resulting from an incident that occurred on the
_____ day of _____, _____, in _____ County, Florida.
(day) (month) (year) (city) (county)

SECTION I

The undersigned client hereby agrees to pay for the cost of investigation, expenses and, should it be necessary to institute a lawsuit, the court costs thereof. Clients agree to pay any and all costs incurred by said attorneys from any recovery obtained; these expenses may include, but shall not be limited to, court costs, computer research time, deposition costs, advanced costs financing, Xeroxing, postage, long distance telephone calls, photography expenses, doctor's conferences, expert witness fees, subpoena fees, investigators, witness fees, expert witnesses, court reporter expenses, travel expenses, and any and all other expenses the attorneys consider reasonably necessary for the litigation of this action. *

I agree to pay costs incurred by LAW OFFICE OF CHAD A. BARR, P.A. for investigating and/or prosecuting this case out of any recovery I receive. Costs will be deducted from any recovery after deducting attorney fees and before any other distribution.

- a. If the firm of LAW OFFICE OF CHAD A. BARR, P.A. withdraws from my case, I agree to pay LAW OFFICE OF CHAD A. BARR, P.A. their costs incurred during their representation if I make a recovery;
- b. If, however, I discharge LAW OFFICE OF CHAD A. BARR, P.A. during the pendency of this case, I agree any outstanding costs incurred by the firm up to the time of discharge will become due and payable at that time regardless of recovery;

- c. If I never make a recovery, I do not owe LAW OFFICE OF CHAD A. BARR, P.A. any costs except as described in paragraph 1(b);
- d. LAW OFFICE OF CHAD A. BARR, P.A. is authorized, on my behalf, to execute any and all documents, including pleadings, stipulations and agreements, as it may become necessary to investigate, evaluate and prosecute my claim;
- e. I authorize LAW OFFICE OF CHAD A. BARR, P.A. to retain at my expense and employ on my behalf and in my name the services of any accountant, consultant, physician or other expert or investigator LAW OFFICE OF CHAD A. BARR, P.A. deems, in its discretion, necessary to investigate, evaluate and prosecute my claim; and
- f. I authorize LAW OFFICE OF CHAD A. BARR, P.A. to take any other such steps as it deems, in its discretion, necessary to investigate, evaluate and prosecute my claim.

*** no recovery, no costs.**

(1-client initials- Section I)

SECTION II

As compensation for their services, the undersigned client agrees to pay said attorneys, from the proceeds of recovery, a fee to be calculated and determined in accordance with the following schedule:

- 33-1/3% of any recovery obtained without the necessity of filing a lawsuit, regardless of the amount of said recovery;
- 40% of any recovery up to \$1 million obtained after the filing of a lawsuit but without the necessity of a trial, or obtained after a demand for appointment of arbitrators;
- 40% of any recovery up to \$1 million obtained through a trial of the case;
- 30% of any recovery between \$1 and \$2 million;
- 20% of any recovery in excess of \$2 million.

If a defendant admits liability at the time the answer is filed and requests a trial on damages only:

- 33-1/3% of any recovery up to \$1 million
- 20% of any recovery between \$1 and \$2 million
- 15% of any recovery in excess of \$2 million

If an appeal is necessary:

- 5% of any recovery said 5% to be additional to any fee in accordance with the above provision

At any time during the existence of this executed contract said law firm has the discretion upon reasonable notice to withdraw as representative counsel and/or terminate the responsibilities and obligations under this contract. CLIENT is represented by the Law Firm of LAW OFFICE OF CHAD A. BARR, P.A. on a contingent fee basis which provides that if there is no recovery, there is no fee. CLIENT herein acknowledge substantial efforts expended by LAW OFFICE OF CHAD A. BARR, P.A. in the representation of the client, including expenditure of time and expenses. The clients acknowledge that the firm is turning down other work in order to devote substantial time and effort in the prosecution and defense of the cases involving the client. CLIENT hereby agrees to pay attorneys fees and costs incurred in the amount of \$450.00 per hour for attorney time and \$150.00 per hour for paralegal time only in the event that the client negotiates a settlement directly with the adverse party in any pending litigation or otherwise agrees to dismissal of any claims involving the law firm without the express agreement of the law firm.

(1-client initials-Section II)

SECTION III

This contract may be canceled by written notification to the attorney at any time within three (3) business days of the date the contract was signed, as shown below, and if canceled the client shall not be obligated to pay any fees to the attorney(s) for the work performed during this time. If the attorney(s) have advanced funds to others in representation of the client, the attorney(s) are entitled to be reimbursed for such amounts as they have reasonably advanced on behalf of the client.

It is hereby agreed and understood that if a recovery is obtained, the undersigned attorney shall prepare a Closing Statement reflecting an itemization of all costs and expenses, together with the amount of the fee received by each participating attorney/law firm. Said Closing Statement shall be executed by all undersigned and participating attorneys, as well as the undersigned client, and each shall receive a copy of same.

All undersigned and participating attorneys hereby agree to retain copies of this contract, the Closing Statement, if any, and the Statement of Client's Rights, for six (6) years following the date of execution of the Closing Statement.

It is understood that if the undersigned client changes residence or addresses that he/she will notify all attorneys or firms participating in this contract or else all such attorneys or firms shall be absolved from further prosecution of his/her case.

Dated this _____ day of _____, _____.

Client Signature

Print Client Name

LAW OFFICE OF CHAD A. BARR, P.A.

By: _____

ASSOCIATING FIRM:

Name of Firm: _____

Fee Agreement with Associating Firm: _____

Authorized Representative of the Associating Firm: (Print) _____

Signature of Authorized Representative: _____

Date: _____