

DISCLOSURE AND CONSENT

1. [Name of firm] was retained on [date], by [name of client] to [describe services to be performed].
2. The representation is under the terms of [a written/an oral] agreement that provides, among other things, that the fee for the services will be [state amount or describe basis on which fee will be computed]. [A copy of the agreement is attached.]
3. [Name of firm] desires to associate [name of associate firm] to [describe duties, e.g., conduct the trial].
4. [Name of firm] will pay [name of associate firm] [state amount or describe method of computing amount, e.g., 10 percent of net recovery] for the services of the associate firm.
5. The payment will be at the expense of [name of firm], and the association will not be the cause for any increase in fees.

Date: XXX            [Typed name of firm]  
                         [Signature of attorney]  
                         [Typed name]  
                         Attorney for XXX

Date: XXX            [Typed name of associate firm]  
                         [Signature of attorney]  
                         [Typed name]  
                         Attorney for XXX

I understand that [name of associate firm] is being associated with my case and that [name of firm] will pay [name of associate firm] [state amount or describe method of computing amount, e.g., 10 percent of net recovery]. I consent to the association and fee splitting.

Date:                [Signature of client]  
                         [Typed name]