## FEE STATEMENT AND RETAINER AGREEMENT GOVERNING THE PROVISION OF FORENSIC CONSULTATION SERVICES **Dr. Amy Schultz**

<u><b>DATE OF AGREEMENT</b></u> : This agreed amy Schultz, expert, is entered into of	ement betweena	, retaining attorney, and Dr. and shall constitute the entire agreement in the matter 
SCOPE OF WORK: The expert will	render assistance to the agency	in this case by:
<ul><li>1. Assisting the designate the case:</li></ul>	d attorney in the case preparati	on, which will include work on the following phases of
	(2) discovery; (3) witness (	preparation;
	specify):	
2. Preparation of an exam	nination and a ( ) report. The	examination shall be based upon:
		; (2) examination by the expert;
(3) independent	nvestigation by the expert;	
(4) other (please	specify):	
	of this case which will occur at ar	
agreement the expert	does not agree to testify to a pa	expert's examination and oral or written report. By this articular conclusion. The expert does agree to prepare uate notice, and to dress in appropriate business-like
ancially responsible party. The responding spandless of the party that initiates the sponsibility even if the time spent is ortaining attorney seek reimbursement	onsible party shall pay the fee service. Since Dr. Schultz is ret activities perceived to be advers of any fees from another party	retained as an independent expert. The client is the es for all time and services provided in this matter rained as an independent expert, this includes financial se to the interests of the responsible party. Should the retaining attorney and not to Dr. Schultz.
pointments, collateral appointments, nted materials, reviewing documents	broken and canceled appointme	to, charges for consultations, interviews, evaluation ents, testing, test scoring, test interpreting, reviewing rts, affidavits, and testimony, and staff and research
reed to in writing), and all legal procestimony. The fee for all time and service aluations, declarations, affidavits, dependent of multiple hours, the retainment for depositions and testimony will not telephone consultations with Descriptions.	eeedings, including time reserve ces provided by any of Dr. Schul ositions, consultations, and test ing attorney is responsible for t ot be reserved until payment for or. Schultz are billed per tenth of or broken. For all copying, inclu	res provided in-office, portal-to-portal (unless otherwise of to provide declarations, affidavits, depositions, and tz's administrative assistants is \$50.00 per hour. Since timony require considerable preparation time and the the time reserved for these services and proceedings the requested time is received.  If an hour or any portion thereof, including scheduled ading faxing, charges are \$.20 per page, plus handling
METHOD OF COMPENSATION	Mr. The expert's compensation of	
	1. The experts compensation si	hall be received as follows:
a. A retainer in the amou		hall be received as follows: paid prior to the rendition of any services.
<ul><li>a. A retainer in the amount</li><li>b. Upon completion of the</li></ul>	nt of <u>\$</u> shall be p	

**PAYMENT:** Payment is due and payable at the time of service. Service charges will accrue at 1.0% per month (or a minimum service charge of \$2.00 per month), but not to exceed the amount permissible by law, on any balance not paid within

d. Other (please specify):

30 days after the charge was incurred. Should a check be returned by the bank for any reason whatsoever, a \$25 returned check fee will be due, and all charges owing shall become immediately due and payable.

**FINANCIAL RESPONSIBILITY AND THIRD-PARTY PAYMENT:** The financially responsible party is the retaining attorney. The retaining attorney, and not any third party, assumes complete financial responsibility for all of the fee obligations contained herein even though reimbursement of these fees may be sought by the retaining attorney from another party. Health insurance does not usually cover forensic examinations and the intent to seek insurance coverage is not a substitute for any of the financial obligations described herein. The acceptance by Dr. Schultz of payments from a third party shall be construed only as payments made by the third party on the behalf of the financially responsible party and not as an indication that the third party is the financially responsible party.

**APPOINTMENTS AND CANCELLATIONS:** Because the scheduled appointment time is held exclusively for one person or task, advance notice of cancellation is required. Cancellation charges are calculated as per the table below:

Amount of Time Reserved for Consultation, Evaluation, or Testimony	Number of Business Days' Notice of Cancellation Provided	Amount of Charge for Canceled Time
one hour or less for consultation	one full business day (24 hours)	no charge
	less than one full business day notice or no notice	full charge
more than one hour for consultation or evaluation	five full business days (120 hours)	no charge
	less than five business days notice or no notice	full charge
trial work (scheduled in half-day increments unless otherwise agreed)	five full business days (120 hours)	no charge
	less than five business days or no notice	full charge for half-day work (four hours)

**COLLECTION:** If an account is due for 60 days, it shall be sent for collection. The responsible party shall pay all reasonable costs of collecting the bill, such as reasonable collection agency charges which are 50% of the bill, reasonable attorney's fees, and court costs. The 50% collection agency charge shall be added to the bill and shall become part of the financial responsibility at the time the account is sent to the collection agency.

In the event that legal action is instituted to collect fees and charges, the responsible party shall pay all additional reasonable costs and fees resulting from the suit, such as reasonable collection agency charges which are 50% of the bill, reasonable attorney's fees, and court costs and that the suit shall be filed and the matter shall be properly heard in Washington County, Oregon.

**TERMINATION:** Dr. Schultz may immediately and without prior notice terminate her services and contacts at any time she has reason to believe that any party is not fully complying with the provisions stated herein or with any orders of a court of competent jurisdiction. No services, including reports, recommendations, or opinions, will be provided after services are terminated for any reason.

**AGREEMENT:** All agreements and contracts with Dr. Schultz are in writing. There are no oral agreements that may supersede this written policy statement on this matter. Any modification of the terms of this statement must be in writing and signed by Dr. Schultz. Should Dr. Schultz, at her sole discretion, choose to waive any requirement under the terms of this statement, that waiver shall not be deemed a subsequent waiver of that requirement or any other requirement under the terms of this statement or other contract. Dr. Schultz, in agreeing to provide this consultation, is specifically relying on the responsible party's agreement to abide by all of the terms of this statement.

Dr. Amy Schultz, Ph.D.	Retaining Attorney