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CONSULTING SERVICES NEW REQUEST PACKET

This document is meant to be a guide to help attorneys know what they must provide to retain our services. As always, we welcome phone calls. We are glad to discuss the specifics of your case and what information we would need from you to get started.

Contents of this packet:

- · Checklist detailing what we need and how to submit it;
- · Request form; and
- Explanation of our requesting attorney policy.

Retention Overview

To retain our services, you must provide the information detailed in the checklist. Once we receive the request form and the retainer, we will reach out to you to schedule a call to discuss your case.

Our consulting services include:

Customized language - We draft settlement agreement language, addendums, clarifying orders, and letters specific to the retirement plans and needs of your individual cases.

Executive benefit assistance – We help you understand the complex provisions of non-qualified plans, stock options, top-hat plans, incentive plans, bonuses, and excess benefit plans which usually require a specialized approach.

Review of opposing counsel's drafted orders/settlement agreement language - We will examine the decree, benefit information, plan documents, and proposed Order and inform you of any issues that may be of concern.

Litigation assistance - We can help with your preparation from legal research to strategy and brief writing.

Only attorneys may retain our services. Although our company employs attorneys, we do not represent clients or perform any services for non-lawyers. If you are a party in a divorce and wish to use our services, please have your attorney contact our office.

CONSULTING SERVICES REQUEST FORM

A consulting service request requires a retainer of \$600. All consulting services will be charged at a rate of \$300 per hour. In the event that the request will require more than 2 hours, we will contact you for approval of additional charges.

Requesting Attorney Informat	ion	
Represents: Plan Participant	Alternate Payee	
• Name		
Address, City, State, Zip		
• Phone		
• Email		
Assistant Email		
Opposing Counsel Information	ı	
• Name		
Address, City, State, Zip		
• Phone		
• Email		
Assistant Email		
Duration of the Marriage		
Date of Marriage	Date of Divorce	
Alternate Payee Information		
• Name		Gender: Male Female
Address, City, State, Zip		
• SSN	DOB	
• Role Plaintiff Defendant		

Participant Information				
• Name		Gender:	_ Male	Female
Address, City, State, Zip				
• SSN	DOB			
• Role Plaintiff Defendant				
Requesting Attorney Informati	ion			
☐ Customized language				
☐ Executive benefit assistance				
☐ Review of opposing counsel's drafted or	ders/settlement agreement language			
☐ Litigation assistance				
Details of Request				