**FEE AGREEMENT**

The undersigned employ the LAW OFFICE OF JAMES C. FORSLUND for the following matter on the following terms: Colorado License Application and/or Hearing

Compensation: Hourly Rate $ 200.00 (additional matters)

Flat Rate $ 1200.00 (above). *

FEE $ 1,200.00 .

TOTAL PAID $ 600.00 .*

BALANCE DUE $ 600.00 due 10 days prior to application or hearing

In consideration for the fee, the Law Office agrees to represent the client and take appropriate steps to bring the client's matter to an acceptable conclusion.

Fees are earned in proportion to the necessary hearings listed for the flat rate to resolve the matter. A minimum of one hour at the hourly rate is earned on retention.

Clients on an hourly rate will be billed for any attorney time and costs in excess of the Fee. If more than one hour of attorney time is required to complete the matter upon depletion of the Fee, the Law Firm may bill for a further Fee to cover the time which are forseeably necessary. Such determination shall be made at the discretion of the Law Firm and services may be suspended until payment is made.

Clients on flat fee will be billed for any costs not included in the flat fee.

It is further agreed: * costs included in flat fee:
**ANY AMOUNT BILLED IS DUE IN FULL ONE MONTH FROM THE DATE OF BILLING.** If any balance is not paid when due, a **FINANCE CHARGE** will be added and the Law Firm may suspend services and withdraw from this matter. The finance charge will be computed on any portion of the balance which is not paid when due. The periodic rate is **1.5 %** per month or an annual percentage rate of **19.56 %**.

It is agreed that no guarantees have been made regarding the successful determination of this matter. If it should become necessary for the Law Office to take collection on any amounts due under this agreement, the client will be responsible for all reasonable costs of collection, including reasonable attorney fees.

*EACH PARTY HAS FULLY READ THIS AGREEMENT AND UNDERSTANDS EACH PROVISION.*

| | |
|---|---|
| ATTORNEY | CLIENT |
| Date Accepted | credit card #, expiration date, billing zip code |