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RETAINER NOTICE AND PAYMENT AGREEMENT

The initial fee of \$_____ is a retainer fee. These fees are paid toward conducting a brief evaluation, a comprehensive evaluation, a social investigation, a relocation evaluation or some other type of psychological and/or parenting evaluation. If your participation in this evaluation is discontinued for any reason before its completion, fees for services already provided are non-refundable and/or are payable at the time the evaluation is discontinued.

Professional fees for all services related to this evaluation are charged at the rate of \$240 per hour against the retainer. Professional fees for services that result from this evaluation (deposition, mediation and trial appearances) are billed at a different rate and are the full responsibility of the person whose attorney requests those services, unless otherwise ordered by the Court.

Signing this document verifies that:

- you understand that your initial retainer may or may not cover the full cost of the evaluation services
- you understand that you will be required to pay the full cost for all services provided prior to the release of any written document and prior to any appearance at mediation, deposition or court even if the evaluation is discontinued before completion
- you accept responsibility for payment of your legally specified share of the cost of the services provided by Dr. Jill Sanders.

I have read this notice and agree to abide by its provisions.

Signature

Print Name

Date