CONTRACT FOR LEGAL SERVICES – TRAFFIC MATTERS ONLY

begin once Client has signed th	This agreement will become binding and representation will also Contract for Legal Services (hereinafter, "Agreement") and or herein. This Agreement replaces and supersedes any previous
or any other lawyer employed at	RESENTATION. ERIC M. WILLIAMS, JOSEPH J. GARCIA, The Law Offices of Eric M. Williams, PLLC ("Lawyer") agrees ("Client") in the following Traffic matter
including the complete and trutidentification and location of vinterviews and hearings, and Cl	N. Client agrees to fully cooperate with Lawyer in every way, hful disclosure of all information concerning Client's case, the witnesses and documents, Client's appearance at depositions, ient agrees to keep Lawyer updated regarding Client's contact also agrees to make all payments pursuant to the terms of the
Client understand that fee mus to pay Lawyer \$ Client understands and specifical legal work to be performed by legal work; The flat to be deposited in Lawyer's busines representation ends, Client will re	as a flat fee for resolution of the case in district court only. It be agreed upon by both Client and Lawyer. Client has agreed on or before Ily agrees that: The flat fee is the entire payment for the specified Lawyer regardless of the amount of time that it takes lawyer to fee will be earned by Lawyer immediately upon payment and will as account rather than a client trust account; and When Lawyer's not be entitled to a refund of any portion of the flat fee unless (1) in which event a proportionate refund may be owed, or (2) it can
be demonstrated that the flat fee understands that The Law Offi agreement and payment are ne	e is clearly excessive under the circumstances. Further, Client ces of Eric M. Williams, PLLC cannot represent Client if this ever received and processed. If Client has not heard from Thems, PLLC within 2 days of payment, Client will contact The
CLIENT INFORMATION:	
First Name:	Phone Number:
Middle Name:	Email Address:
Last Name:	Mailing Address:

Social Security No:		City/State/Zip: State/Driver's License No: How Were You Referred:				
				CLIENT'S PAYMENT	INFORMATION	:
				Card Cash	Money Order _	
CLIENT'S CARD INF	ORMATION (IF A	APPLICABLE):				
Card Holder's Name:		Card Number:				
Exp. Date:	CVV Number	: Billing Address :				
Signature		<u></u>				
Printed Name						