

Agreement Letter

PLEASE READ AND PRINT THIS LETTER, AND E-MAIL SIGNED COPY TO paul12357@proton.me, OR ENCLOSE WITH RECORDS. Thank you.

I, _____ (name of attorney) am hereby retaining the services of C. Paul Sinkhorn, MD for the review of the matter entitled:

(name of case; please **CIRCLE** your client)

for the purposes of a medical opinion and possibly for deposition or trial testimony. I have reviewed Dr. Sinkhorn's fee schedule and agree to the payment terms, including payment of all invoices within 30 days of invoice date. I also agree that 8% annual interest will be charged for all overdue payments (0.67% per month). Any disputes about payment will fall under jurisdiction of the Riverside, California court system.

I understand that typical turnover time for case review is within **25 working days (5 working weeks)**, unless special arrangements have been made for expedited services (thereby incurring a 30% surcharge). It is understood that fees are subject to change over the course of litigation of a case. It is also understood that Dr. Sinkhorn does not take cases against the University of California system.

PLEASE DO NOT SEND ANY ORIGINAL FILES, INCLUDING XRAYS/VIDEOS/CDs/etc, AS THESE CANNOT BE RETURNED. PLEASE SEND COPIES ONLY.

DATE: _____

ATTORNEY: _____

FIRM: _____