## ATTORNEYS FOR COURT

Law Office of Jorg M. Rivera, P.A. d/b/a Attorneys For Court, Orlando, Florida Phone (321) 206 - 8108 Fax (866) 835 -1161 REPRESENTATION AGREEMENT FOR ATTORNEY APPEARANCE

## AT SMALL CLAIMS TRIAL

RIVERA, P.A. D/B/A AT "ATTORNEY"), to provide filed action where CLIEN limited to ATTORNEY mathe Small Claims Trial that	agrees to hire and TORNEYS FOR Core to CLIENT legal IT is a named party aking a one time or at is scheduled for	authorizes the LAW OFFICE OF COURT (herein after referred to as imited representation in the Small thereof, the scope of said represently Court Appearance on behalf of hearing before the Small Claims County for hearing on the coming 2.	JORG M. Claims Court entation is CLIENT at Court of
claims or defenses and a CLIENT Information She CLIENT'S appearance mby and through a telephonumber) does not appear in Court	ecceptable settlement et and CLIENT will may be by physical price call with the Co su by physical present ent authority subjec	r information and documents of CL ent conditions as detailed in the att appear at the above dated legal had presence at the hearing in Court of ourt during the hearing at (CLIENT') bject to approval of the Court. If the nace or by telephone CLIENT hereing to the acceptable settlement cond	ached learing. r alternatively S phone e CLIENT n grants
CLIENT agrees that the inherein above referenced	role of ATTORNEY where ATTORNE	does not cover post judgment colle terminates after the end of the Co has appeared on behalf of CLIEN ORNEY'S TERMINATION OF LIM	ourt hearing NT, and,
	ee in the amoun	compensation for appearance t of \$175.00, set fee to be paid Small Claims Trial.	l at least
ATTORNEY to sign thi ATTORNEY will have a signed copy of this Agriculture deadline. ATTORNEY appearance attorneys agrees to pay all necessmall Claims action. A Court fees and costs a Nothing in this Agreem be construed as a proression.	s Agreement, furth no obligation to pro- reement and has may use any of it for the herein reposary Court fees a TTORNEY will not ssociated with Clayent and nothing in the or guarantee	ration under this agreement requirement this Agreement will not take rovide representation, until CLIE made payment according to the s network, associated law firms resentation appearance matter and costs associated as named of the responsible for any LIENT'S named Small Claims as a ATTORNEY'S statement to Costs about the outcome of the matter about the outcome of the matter and the costs associated as named on ATTORNEY'S statement to Costs about the outcome of the matter and the costs as a cost and the costs are costs as a cost as a cost and the costs are costs as a cost as a cost and the costs are costs as a cost and the costs are costs as a cost as a cost and the costs are costs as a cost as a cost as a	e effect, and ENT returns e outlined , local CLIENT party to the ction. LIENT will er.
	Dated	ATTORNEYS FOR COURT	Dated
 CLIENT Signature	//09	Jorg M. Rivera, Esquire	//09

## ATTORNEYS FOR COURT

Law Office of Jorg M. Rivera, P.A. d/b/a Attorneys For Court P.O. Box 720366, Orlando, Florida 32872-0366
Phone ( 321 ) 206 - 8108 Fax ( 866 ) 835 -1161

## **CLIENT INFORMATION SHEET**

FILL OUT AND RETURN BY FAX TO: (866) 835-1161 (PLEASE PRINT)

xCLIENT'S NAME			
XCLIENT'S ADDRESS, CITY, STATE, ZIP			
XCLIENT'S HOME PHONE	XCLIENT'S CELL PHONE	X_ CLIENT'S FAX PHO	NE
xCLIENT'S E-mail Address	x CLIENT'S COURT CASE NUMBER (EX: 2009-SC-123456)		
CLIENT'S DESCRIPTION OF CLAIM:			
			_
IMPORTANT: CLIENT MUST ATTA	CH COPY OF THE COMPLAI	NT AND OTHER NECESSARY	Y DOCUMENTS
CL	IENT'S SETTLEMENT CON	IDITIONS:	
LUMP SUM SETTLEMENT: ACCE	PTABLE AMOUNT \$	TO BE PAID WITHIN	I DAYS
PAYMENT PLAN: FIRST PAYMEN	T DUE (N	MONTH) (DAY),	(YEAR)
AMOUNT OF EACH PAYMENT \$	REPAYMEN	T TIME NOT TO EXCEED	MONTHS
OTHER (Explain):			
XCLIENT'S SIGNATURE		DATE	<del></del>

**RETURN BY FAX TO: (866) 835-1161** 

APPEARANCE PAYMENT CAN BE MADE ONLINE @ www.SmallClaimsCourtLawyer.com