

Asset Analysis, LLC

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Retainer Agreement

1. I (We), _____, hereby retain and employ Asset Analysis, LLC and Wayne A. Starr, CFP, CDFA, Certified Divorce Financial Analyst, to provide financial counseling for me in the matter of my divorce. I(We) agree to pay all fees and costs incurred. I(We) agree to advance the sum of \$_____ as a retainer against fees and costs of the consultation.

2. Hourly Fee Schedule: It is mutually agreed that I(we) shall be charged for services at the rates set forth below:
 - Financial Analysis including Meetings \$125.00 hr.
 - Travel Time \$ 50.00 hr.
 - Court, Arbitration , and Hearing Testimony \$200.00 hr.
 - Divorce and Financial Mediation \$125.00 hr.
 - Administration \$ 75.00 hr.I (We) further agree to be responsible for all long distance calls, fax charges, and photocopies.

3. Retainer and Payment: All work accomplished shall be charged against said retainer of \$ _____ until such time as the retainer is exhausted. I(We) understand that the retainer may not pay all the fees and costs necessary to complete the consultation. Should the initial retainer be consumed, Asset Analysis, LLC may require additional retainers in an amount deemed to be appropriate. Any part of the retainer that is not used will be refunded.

4. Obligation to Provide Accurate Data: I (We) agree to provide Asset Analysis, LLC with accurate, reliable and complete financial statements and information. I understand Asset Analysis, LLC will rely exclusively on such information provided. Consequently, I(we) agree I(we) will not hold Asset Analysis, LLC or its divorce planners accountable for any errors or omissions in their work product resulting from any failure to provide accurate, reliable and complete financial information to them.

5. Independent Legal Advice: Asset Analysis, LLC provides supporting financial information and evaluations to be utilized by the client and the client's selected divorce attorney. Asset Analysis, LLC does not provide legal advice. Additionally, all work is deemed confidential, and subject to all applicable attorney-client privileges and work product protection.

Signature indicates the above has been read and agreed to:

Client Date

Client Date

Wayne A. Starr, CFP, CDFA Date

Client's Address: _____

Client's Phone Numbers: Home: _____

Work: _____

Cell: _____

