





Professional Investigations Client Retainer Agreement Form

This agreement, made this	_ day of		between	
This agreement, made this(Client's Name) address herein	after known as the cli	, C1ty_ ent. and Profession	nal Investigations	, State,
(A) Client retains Professional Inv		llection of evidence	ce in the matter of	
(B) Client agrees that Profession behalf of the client and to compare the client and the clien				red to perform said services for a erforming said services.
	ent and agrees that	whatever confid		investigation with due diligence on is obtained while conducting
sum of \$1,000.00 (Amount of per hour, plus \$0.55 cents per his/her behalf. The hourly rate bills time in quarter hours, when Professional Investigations, in personnel, police, or others when Professional Investigations; or	Retainer Fee Quoter mile, plus actual of e plus costs and expand the means every fifucluding, but not ling whose information iffice visits; meeting med necessary to the	ed by Profession costs and expensionses will be de- teen minutes. The mited to, telephoral important to the significant of the case by Professions and Professions	nal Investigations ses for each agent ducted from the rather client will be cone calls with the case, whether ice; preparation ossional Investigation	their associates and employees, b). The hourly rate shall be \$60.0 authorized by the client to work retainer. Professional Investigationary for all services provided e client, attorneys, witnesses, corron to those calls are initiated for case reports and for any search ions. All services are to be paid by the client at a later date.
				Investigations, any balances ow on, shall become due and payable
at the request of the client du	ie to this investigat	ion. Said hourly	rate will be paid	er hour for any time spent in co d regardless of the fact that it n per mile charge for miles driver
				rees, has made no guarantee to or criminal litigation involving a
investigation will be paid in fu	all at that time. All ronth or any portion	nonies not paid thereof for each	in full as agreed von and every mont	ations, at the completion of t will be subject to a one and one-h th the balance remains unpaid.
	ional Investigations	, or any of the	ir agents or empl	information of the client only. I loyees, harmless from any and
(J) If at any time the client, fr the discretion of Professional				above investigation, it will be at to refund of any monies.
Client Signature:				Date:

Investigator: ______ Date: _____