CPA FINANCIAL ADVISORY RETAINER AGREEMENT

This CPA Financial Advisory Retainer Agreement (the "Agreement") is entered into and made effective as of ____________________, by and between:

CPA Firm: ____ with a principal place of business at ____ (hereinafter referred to as the "Advisor"), and

Client: ____ with a principal place of business/residence at ____ (hereinafter referred to as the "Client").

1. ENGAGEMENT AND SCOPE OF SERVICES

The Client hereby engages the Advisor, and the Advisor agrees to provide ongoing CPA financial advisory services. The scope of services under this retainer includes the following ongoing professional consultations:

1. Regular financial health assessments and review of accounting records.
2. Strategic tax planning, compliance oversight, and advisory services.
3. Budgetary analysis, forecasting, and cash flow management consultation.
4. Periodic meetings to discuss operational performance, financial strategies, and corporate decisions.
5. Other mutually agreed-upon financial advisory services as specified in writing.

2. RETAINER FEE AND PAYMENT TERMS

In consideration for the ongoing services provided by the Advisor, the Client agrees to pay a recurring retainer fee under the following terms:

1. **Retainer Amount:** The Client shall pay the Advisor a recurring monthly retainer fee of $______________.
2. **Payment Schedule:** The retainer fee is payable in advance on or before the _______ day of each calendar month.
3. **Payment Method:** Payments shall be made via ____________________________.
4. **Additional Services:** Any services requested by the Client exceeding the scope of this ongoing advisory retainer will be billed separately at the Advisor's standard hourly rate of $______________ per hour, subject to prior written authorization from the Client.

3. TERM AND TERMINATION

1. **Term:** This Agreement shall commence on ____________________ and shall continue on a month-to-month basis until terminated by either party.
2. **Termination:** Either party may terminate this Agreement at any time, with or without cause, by providing _______ days written notice to the other party. Upon termination, any outstanding fees for services performed up to the termination date shall become immediately due and payable.

4. CLIENT RESPONSIBILITIES

The Client agrees to provide the Advisor with all necessary financial records, bank statements, source documents, and information required for the performance of the services in a timely and accurate manner. The Advisor shall not be responsible for any errors, omissions, or delays resulting from the Client's failure to provide accurate and complete information.

5. CONFIDENTIALITY

The Advisor agrees to maintain strict confidentiality regarding all financial information, trade secrets, and proprietary data obtained from the Client in the course of performance under this Agreement, in accordance with applicable professional ethics codes and legal standards.

6. LIMITATION OF LIABILITY

The liability of the Advisor for any claim, loss, or damage arising out of or in connection with this Agreement shall be limited to the total amount of retainer fees paid by the Client to the Advisor under this Agreement during the ______ month period immediately preceding the event giving rise to the liability.

7. GOVERNING LAW

This Agreement shall be governed by, and construed in accordance with, the laws of the State of ____________________, without giving effect to any principles of conflicts of law.

8. ENTIRE AGREEMENT

This Agreement constitutes the entire understanding between the parties with respect to the subject matter hereof and supersedes all prior agreements, representations, or understandings, whether written or oral.

IN WITNESS WHEREOF, the parties hereto have executed this CPA Financial Advisory Retainer Agreement as of the date first written above.

FOR THE ADVISOR:

____

AUTHORIZED SIGNATURE

Printed Name: ____________________________

Title: ____________________________

Date: ____________________________

FOR THE CLIENT:

____

AUTHORIZED SIGNATURE

Printed Name: ____________________________

Title: ____________________________

Date: ____________________________