

LEGAL SERVICES RETAINER RECEIPT

Official Document of Trust Account Deposit

RECEIPT NO:

CASE/MATTER:

DATE:

FILE NO:

LAW FIRM/ ATTORNEY

CLIENT

NAME:

NAME:

ADDRESS:

ADDRESS:

PHONE:

PHONE:

DESCRIPTION OF SERVICES COVERED BY RETAINER	AMOUNT ALLOCATED

PAYMENT METHOD: Cash Check No. _____ Credit Card Wire Transfer

TOTAL RETAINER AMOUNT RECEIVED: \$ _____
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The sum received represents a retainer payment for legal representation. These funds shall be deposited into the firm's Client Trust Account (IOLTA/Trust Account) and shall be drawn down as legal services are performed and/or expenses are incurred, in accordance with the terms of the signed Retainer Agreement. This receipt does not constitute a full agreement for representation.

AUTHORIZED REPRESENTATIVE SIGNATURE

CLIENT SIGNATURE (ACKNOWLEDGMENT)