

RETAINER AGREEMENT

I, the undersigned client, do hereby retain and employ PAUL S. LEVIN, ESQ., as my attorney to represent me concerning any possible claims for damages against any persons, firms, or corporations liable therefore resulting from an accident/injury that occurred on _____.

I hereby agree to pay for the cost of investigation and, should it be determined by said attorney to institute suit, the costs of suit. As a convenience to me, these costs may be advanced by Attorney Levin and these costs along with related expenses will be reimbursed at the time of settlement or judgment. As compensation for his services, I agree to pay my said attorney from the proceeds of recovery a fee equal to thirty three and one-third (33-1/3%) percent of the damages awarded and received or the settlement received prior to repayment of such costs of any medical charges. It is understood and agreed that the fee will be modified to comply with the requirements of Connecticut General Statutes, Section 52-251C where it is required by the amount of the award or settlement. In that event, the fee would be adjusted downward as required by statute.

The fee will be due and payable whether or not a lawsuit is instituted in the event a settlement is obtained.

It is agreed and understood that this employment is upon a contingency fee basis and if no recovery is made, I will not be indebted to my said attorney for any sum whatsoever for attorney's fees unless a counterclaim is presented in which case I will either allow my attorney to withdraw his appearance or charge me his usual hourly rates. In addition, I have been instructed not to discuss this case with any other attorney, insurance adjuster, nor any individual, except with the permission of my attorney.

I hereby consent to the disclosure of any medical records which I may authorize my attorney to obtain to whomsoever he deems appropriate in connection with my claim. I further authorize Attorney Levin to utilize or associate with any other counsel in order to promote the efficient administration of my case.

I hereby acknowledge that I have, this date, received a copy hereof.

Dated: _____