

# Legal Malpractice Representation Agreement

[Your Law Firm's Name]  
[Your Law Firm's Address]  
[City, State, Zip Code]  
[Phone Number]  
[Email Address]  
[Date]

[Client's Name]  
[Client's Address]  
[City, State, Zip Code]

## Subject: Legal Malpractice Representation Agreement

Dear [Client's Name],

We are pleased to confirm that [Your Law Firm's Name] will represent you in your case concerning legal malpractice. This letter outlines the terms of our representation.

### 1. Scope of Representation

We will represent you in your claims against [Name of Attorney or Firm] arising from [Brief Description of Malpractice Issue].

### 2. Fees

Our fee structure is as follows: [Detail the fee arrangement, e.g., hourly rate, contingency fee, retainer, etc.].

### 3. Costs

You will be responsible for all costs and expenses incurred during the representation, including but not limited to filing fees, expert witness fees, and court costs.

### 4. Communication

We will keep you updated on the progress of your case and will consult with you before making any significant decisions.

### 5. Termination

Either party may terminate this agreement at any time upon written notice. Any fees for services rendered until the date of termination will be due.

Please sign below to indicate your acceptance of this agreement and return a signed copy to our office.

Sincerely,  
[Your Name]  
[Your Position]  
[Your Law Firm's Name]

Accepted by:

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[Client's Name]

Date: \_\_\_\_\_