# **Attorney-Client Confidentiality Agreement**

Date: [Insert Date]

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

Dear [Client's Name],

This Attorney-Client Confidentiality Agreement ("Agreement") is made between [Attorney's Name], located at [Attorney's Address], and [Client's Name] as of the date set forth above.

### 1. Purpose

The purpose of this Agreement is to ensure the confidentiality of all communications and information exchanged between the Attorney and the Client in relation to legal services provided by the Attorney.

#### 2. Confidential Information

Confidential Information includes, but is not limited to, any information, documents, or communications shared between the Attorney and the Client concerning legal matters.

## 3. Obligations of the Attorney

The Attorney agrees to keep all Confidential Information confidential and will not disclose this information to any third parties without the Client's express consent, unless required by law.

#### 4. Client's Acknowledgment

The Client acknowledges that they have the right to seek legal counsel and understand the importance of confidentiality in the attorney-client relationship.

### 5. Duration

This Agreement shall remain in effect until such time as the Confidential Information is no longer confidential or until mutual agreement to terminate.

#### 6. Miscellaneous

This Agreement constitutes the entire understanding between the parties concerning its subject matter and supersedes all prior agreements in this regard.

Please sign below to acknowledge your understanding and acceptance of the terms of this Attorney-Client Confidentiality Agreement.

Sincerely, [Attorney's Name] [Law Firm Name]	
Cli d Ci d TOII d N 1	
Client's Signature: [Client's Name] Date:	