

Forensic Accounting Scope of Work Agreement

Date: [Insert Date]

Client Name: [Insert Client Name]

Client Address: [Insert Client Address]

Dear [Client Name],

We are pleased to outline the scope of work for the forensic accounting services we will provide to you. This agreement serves as a mutual understanding of the services to be rendered:

Scope of Work

1. Review of financial records and documents for irregularities.
2. Identification and analysis of potential fraud indicators.
3. Data collection and preservation of relevant financial information.
4. Preparation of detailed reports summarizing findings.
5. Consultation and expert testimony as needed.

Timeline

The estimated timeline for the completion of the above tasks is [Insert Timeline].

Fees

The fees for the services provided will be based on [Insert Fee Structure].

Please sign and return a copy of this letter to indicate your acceptance of the terms outlined above.

Sincerely,

[Your Name]

[Your Company Name]

[Your Contact Information]

Acceptance

Client Signature: _____

Date: _____