

Jeffrey Allen Howard
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Representation Agreement

1. I have retained attorney Jeffrey Allen Howard to represent me regarding the charge(s) of Charge(s)(what speed?): _____ County: _____ Court date: _____ for district court disposition only.

2. I have enclosed \$ _____ as payment of attorney's fees. Do not enclose funds for costs of court or fines unless specifically told to do so by the attorney. I recognize that, in certain circumstances, payment of a higher fine could result in a plea which is more favorable. My attorney has sole discretion to negotiate an agreement on my behalf in order to get the best driving record/insurance point outcome possible. I understand that my payment of attorney's fees/driving record cost will not be held in trust and I waive my right to an accounting of the same.

3. _____ YES _____ NO Has any person on your auto insurance policy received a "pjc" or prayer for judgment continued in the past three years? If left blank, attorney may assume that the answer to this question is "no." * failure to accurately notify my attorney of this information may lead to a plea disposition that will result in the assignment of insurance points to my policy.*

4. I understand that my attorney will use his best efforts and expertise to reduce or eliminate the imposition of insurance and/or DMV points upon my conviction of the offense, and that he cannot and has not guaranteed any particular result.

5. I authorize my attorney to associate counsel, in his discretion, to better facilitate the disposition of the charges against me.

6. I understand that my attorney earns his attorney's fees upon his making a general appearance to the court on my behalf.

Waiver of Appearance

7. I hereby waive my right to appear before the court and contest the charges against me, if such charges are waive able offenses. I authorize my attorney to act on my behalf and enter such plea(s) that, in my attorney's sole discretion, would be in my best interests, even if such disposition might result in adverse insurance or DMV consequences. I request that the court accept my waiver of trial and enter whatever plea my attorney has negotiated.

Full name (print) _____

Signature _____ Date _____

Address _____ City _____ State _____ Zip _____

Phones - work _____ home _____ cell _____

SSN: _____ DOB: _____

Drivers license Number and State: _____

*If I don't get proof of my completion of driving school (when requested) to attorney's office 2 days before my next court date, do not contact my attorney, and do not pay my attorney a \$100 additional fee for an extra appearance, I instruct my attorney to proceed with the disposition of my ticket and accept the next best plea disposition from the assistant district attorney.