



## **20i CONTINGENCY FEE AFFIRMATION**

The undersigned acknowledge and agree the following terms are a part of this contingency fee contract as required by state law:

1. \_\_\_\_\_ (name and title) is the designated state employed attorney;
2. The designated state employed attorney retains complete control over the course of the case;
3. The designated state employed attorney shall be personally involved in oversight of the case;
4. The designated state employed attorney has veto power over any decision made by outside counsel related to the case;
5. Any defendant in the case may contact the designated state employed attorney directly, without having to confer with outside counsel;
6. The designated state employed attorney shall attend all settlement conferences;
7. Decisions regarding settlement of the case shall be reserved exclusively to the discretion of the designated state employed attorney;
8. Outside counsel agrees to keep all records of expenses, disbursement, charges, credits, underlying receipts and invoices, and other financial transactions related to the attorney services from inception of the contract until at least four years after the contract expires, and agrees to make these available for inspection and copying upon request of the Attorney General; and,
9. Outside counsel agrees to maintain detailed contemporaneous time records for the attorneys and paralegals working on the matter in increments no greater than one-tenth of an hour and agrees to provide these records to the Attorney General upon request.

\_\_\_\_\_  
Outside Counsel Signature

\_\_\_\_\_  
Certified this Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Designated State Employed Attorney