

FEE DISPUTE COMPLAINT - TOPEKA BAR ASSOCIATION

Complainant/ Client	Name	
	Address	
	City, State, Zip	
	Phone #	
	Email	
Respondent/ Attorney	Name	
	Address	
	City, State, Zip	
	Phone #	
	Email	

The Fee Dispute Resolution Panel of the Topeka Bar Association consists of volunteer members of the TBA designated by the Association in such number and for such term as the Association may determine. The Fee Dispute Resolution Panel's purpose is to receive, hear, and make confidential non-binding recommendations on client complaints concerning fee disputes or expenses charged by an attorney providing legal services in Shawnee County.

1. **Nature of Representation:** state the following:

- a. The date that you hired the attorney: _____
- b. Does the attorney still represent you? _____ Yes _____ No
- c. Is a legal matter still pending? _____ Yes _____ No
- d. State briefly the nature and duration of the matter in which the attorney represented you:

2. **Fee Agreement:** Please attach, as additional pages, your statement of understanding of the agreement between yourself and your attorney concerning the amount of or method of determining the fee you would be charged for the services performed by the attorney. If the agreement is written or if your attorney sent you an engagement letter. If so, please attach that as well.

3. **Amount in Dispute.** State the amount of fee charged by the attorney, the amount paid by you and the amount which is in dispute. Attach copies of any bilings you have received.

4. **Reason for Dispute.** State briefly the reason why you dispute the amount of the fee charged.

5. **Pending Lawsuit.** If either party has filed a lawsuit about the fee involved in the dispute, state the date filed, the court in which filed and the status of the case. If the issue of the attorney fees owed has been reviewed or determined previously by a judge, provide the name of the judge, the court in which the same was decided, the amount of the fee determined to be owed and any other pertinent information.

6. **Previous Referral.** If you have filed a complaint or referred this matter to any other committee, please state the date on which the same occurred, the committee to which the matter was referred, the issues being reviewed or to be reviewed by the committee and the status.

7. **Documents.** Itimize and attach copies of any other documents you belive are important to the resolution of the dispute

In consideration for the services provided by the Fee Dispute Panel of the Topeka Bar Association, I hereby agree that in no event will I sue or otherwise attempt to hold liable for damages the Topeka Bar Association, the Board of Directors, staff, committee members, mediators, or any agents of the TBA as a result of any of the proceedings of this action.

Signature _____ Date _____

**Send completed form and attachments to: Topeka Bar Association attn: Fee Disputes
Email: tba@topekabar.com or mail: 700 SW Jackson St. Ste. 209, Topeka, KS 66603**