

No. _____
Date Received _____
(FOR OFFICE USE ONLY)

In proceedings before the  
**LEGAL FEE ARBITRATION BOARD**  
of the  
Massachusetts Bar Association

**RESPONDENT'S AGREEMENT TO ARBITRATION OF A FEE DISPUTE**

*The person filing petition ("Petitioner") is:*

*Petitioner's lawyer, if represented:*

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Tel. (home)                      Tel. (work)  
\_\_\_\_\_  
Fax #                                      Email

\_\_\_\_\_  
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***The above-named Petitioner is the lawyer/client/other \_\_\_\_\_ (circle one) and requests arbitration of the fee dispute set forth in this petition.***

*The opposing party ("Respondent") is:*

*Respondent's lawyer, if represented:*

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Address  
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Fax #                                      Email

***Was the attorney referred by the Massachusetts Bar Association's Lawyer Referral Service?  
n Yes   n No   If so, on what date?***

## General Information

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1. Please enclose with this agreement a check or money order in payment of the filing fee due based on the total amount of legal fees charged as provided below:

<b>Total Amount of Legal Fees Charged</b>	<b>Filing Fee</b>
Up to \$2,500 .....	\$ 50
Above \$2,500 to \$5,000 .....	\$ 75
Above \$5,000 to \$25,000 .....	\$150
Above \$25,000 .....	\$225

The check or money order should be payable to the Massachusetts Bar Association and is non-refundable. The Board also accepts payment via credit card.

2. If the Respondent agrees to arbitration, the Petitioner shall pay the balance of the filing fee due based on the total amount of legal fees charged as provided below:
3. The parties must observe Rule III.E. of the Rules of the Massachusetts Bar Association's Legal Fee Arbitration Board, which were provided, with respect to the submission of any additional documents.
4. The Respondent, if possible, should make every effort to discuss the nature of this fee dispute with the Petitioner and attempt in good faith to resolve the dispute.
5. The parties will be notified of the date and time of the arbitration hearing by telephone, fax, e-mail and/or U.S. mail. Any postponement of a hearing is subject to a fee of \$50 payable by the party causing the postponement. The administrator has discretion to waive the postponement fee.

## Agreement

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1. The undersigned agrees to be legally bound by the Award of Arbitrators and the rules of the MBA's Legal Fee Arbitration Board and knows that this agreement is a valid and enforceable contract to arbitrate this dispute. A court with jurisdiction can enter a judgment on the award resulting from the arbitration.
2. No court has come to a final decision on this matter.
3. Each party has the right to be represented, at his or her own expense, by an attorney at each stage of the arbitration proceedings.

## Facts Concerning the Dispute

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1. The total amount of the legal fee charged was \$ \_\_\_\_\_, of which \$ \_\_\_\_\_ has been paid.

2. Was there a written agreement concerning the fee?     Yes     No

If yes, attach a copy.

3. Was the client to be charged:

By the hour?     Yes     No    If yes, how much? \$ \_\_\_\_\_ per hour

A flat fee?     Yes     No    If yes, how much? \$ \_\_\_\_\_

A contingent fee?     Yes     No    If yes, what percent? \_\_\_\_\_%

In some other manner?

Explain.

4. Briefly describe the matter for which legal services were sought (divorce, child support modification, criminal, etc.). If the dispute arises from a professional relationship other than attorney-client, please include a description of the professional relationship and the nature of the fee dispute.

5. Clearly state your position on this fee dispute, including what legal services were to be performed and what legal services were actually performed. (Please continue on back or attach additional sheets if necessary.)

6. How much of a fee do you believe is fair? \$ \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of ~~Petitioner~~ Respondent

(Additional space for responses to questions)

<b>Filing Fee</b> <b><u>PLEASE DO NOT SEND CASH</u></b>	Charge my <input type="checkbox"/> Mastercard <input type="checkbox"/> VISA <input type="checkbox"/> AmEx	
Enclosed is my non-refundable filing fee in the amount of \$25. <input type="checkbox"/> check <input type="checkbox"/> money order	_____	
Please make payable to the Massachusetts Bar Association.	Account # _____	
Send payment and agreement to:	Exp. Date	Today's Date
Massachusetts Bar Association/FAB 20 West St., Boston, MA 02111	_____	
	Signature	