

Please print and sign the attached contract then fax or mail it to WJT Associates. Fax: 303-604 0319  
Mail: PO Box 597, Louisville, CO, 80027 USA

**Contract:**

Consulting Contract - Please sign and return to WJT Associates.  
Keep a copy for your own files.

This contract is between WJT Associates and

\_\_\_\_\_ Hereafter known as the Client.

(a) The work to be accomplished by WJT Associates is to be described in an attachment to this contract.  
General Policy on billing:

1. Payment terms are Net-10 after receipt of invoice.
2. The agreed amount for the client fees will be doubled on the invoice.
3. The Client may take a 50% discount as articulated on the invoice if payment is made during the N-10 Period.
4. Unless otherwise agreed to, the client agrees to pay the full, non-discounted amount, if payment is made after the Net-10 Period.
5. Work will begin when this contract is signed and a purchase order is released.

(b) Fees:

1. Daily plastics consulting: Out of town or legal testimony within a 50 mile radius of Denver Colorado is \$2500 per day billable subject to the above stated terms in paragraph (a).
2. Hourly Consulting: work done at the offices of WJT associates is \$250 per hour subject to the above stated terms in paragraph (a).
3. Legal Consulting per day is \$2500, and \$250 per hour for non-testimonial consulting. Testimony regardless of time is billed at \$2500 per day subject to the above stated terms in paragraph (a).
4. Seminars are billed at \$2500 per day plus expenses or \$3000 per day with WJT Associates absorbing all travel expenses within the continental US subject to the above stated terms in paragraph (a).
5. Subcontracted work will be billed at cost with the approval of the client. subject to the above stated terms in paragraph (a).
6. Travel expenses will be billed at cost with no markup. Arrival at the client's location will be the night before. Preferred carrier is United Airlines, coach class.

WJT Associates agrees to execute the appropriate confidential disclosure forms if required.  
By signing this document, the client agrees any dispute will be settled by arbitration in Boulder county Colorado with each party paying his own legal fees and agrees to these terms.

\_\_\_\_\_ Client name

\_\_\_\_\_ Address

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