## LEGAL SERVICES CONTRACT REVIEW REPORT

(Separate review report required for each contract)

Name of State Agency:  
Name of Contractor:  

<table>
<thead>
<tr>
<th>Contractor’s Physical Street Address (No P.O. Box)</th>
<th>City</th>
<th>ST</th>
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</thead>
</table>

* Is Contractor organized as an Alabama Entity? YES NO  
* If not, has it qualified with the Alabama Secretary of State to do business in Alabama? YES NO  

Is Act 2001-955 Disclosure Form Included with this Contract? YES NO  
Does Contractor have current member of Legislature or family member of Legislator employed? YES NO  
Was a Lobbyist/Consultant Used to Secure this Contract OR affiliated with this contractor? YES NO  
If Yes, Give Name:  

Contract Number:  

Contract/Amendment Total: $ (estimate if necessary)  
Rate of Compensation: $ (If over $85/hr, attach Governor or Attorney General approval)  
Amount of Retainer: & Is this Contract for Litigation? YES NO  
Is this a Contingency Contract? YES NO  

Attorney Assigned Work:  
Is Contractor Appointed by Attorney General? YES NO (If yes, attach copy of appointment letter)  

% State Funds: % Federal Funds: % Other Funds: **  
**Please Specify Source of Other Funds (Fees, Grants, etc.)  

Date Contract Effective:  
Date Contract Ends:  

Type Contract: NEW: RENEWAL: AMENDMENT:  

If AMENDMENT, Complete A through C:  
(A) Original contract total $  
(B) Amended total prior to this amendment $  
(C) Amended total after this amendment $  

Summary of Contract Services to be Provided:  

Why Contract Necessary AND why this Service cannot be performed by Merit Employee:  

I certify that the above information is correct.  

Signature of Agency Head  
Signature of Contractor  

Printed Name  
Printed Name  

Agency Contact:  Phone:  
Revised 04/11/2011