Limited Scope Consumer Bankruptcy Engagement Letter

Date: [Date]

Client Name: [Client Name]
Address: [Client Address]
City, State, Zip: [City, State, Zip]

Re: Limited Scope Representation for Chapter 7 Bankruptcy Filing

Dear [Client Name],

This letter confirms that [Law Firm Name] ("Attorney") has been retained by [Client Name] ("Client") for the limited purpose of providing specific legal services regarding a consumer bankruptcy matter. This is a **Limited Scope Representation** agreement.

1. Scope of Services
Attorney agrees to perform only the following tasks:

- Review of financial documents provided by Client.
- Preparation of the voluntary petition, schedules, and statements of financial affairs.
- Electronic filing of the bankruptcy petition with the court.
- Attendance at the 341 Meeting of Creditors.

2. Excluded Services
The following services are **NOT** included in this agreement:

- Representation in adversary proceedings or litigation.
- Representation in audits or Rule 2004 examinations.
- Negotiation of reaffirmation agreements.
- Post-discharge services or credit repair.
- Motions to avoid liens or motions for relief from stay.

3. Fees and Costs
Client agrees to pay a flat fee of $[Amount] for the services listed above. In addition to the attorney fee, Client is responsible for the court filing fee of $[Amount] and the cost of mandatory credit counseling courses.

4. Client Responsibilities
Client agrees to provide truthful, complete, and timely information. Client understands that failure to disclose assets or income can lead to the dismissal of the case or criminal charges. Attorney is not responsible for errors resulting from inaccurate information provided by Client.

5. Termination of Representation
The attorney-client relationship will end automatically upon the entry of the discharge order or the closing of the case, whichever occurs first, unless terminated earlier by either party in writing.

Please sign below to indicate your agreement to these terms.

_____
[Attorney Name/Signature]

_____
[Client Name/Signature]

Date: _____