

Medical and Legal Fee Schedule  
2008

Practice includes:

- 3) Testing: Fee per hour completed at my office.  
Neuropsychological evaluation  
Neurodevelopmental evaluation  
Psycho-educational evaluation  
Gifted evaluation
  
- 4) Records Review/Research Time/Case Review Consultation: Fee per hour.
  
- 5) Depositions: Fee per hour/ Two (2) hour reserved minimum plus Travel Time and Expenses.
  
- 6) Trial Appearance: Fee per hour/ Four (4) hour minimum plus Travel Time and Expenses.
  - Conferences: Fee per hour completed at my office. Out of office fee per hour/ Two (2) hour reserved minimum plus Travel Time and Expenses.

Appointment times will not be reserved if 50% payment is not received Five (5) business days prior to scheduled appointment.

Completed Payment for independent examinations, depositions, conferences, and trial appearances is required at least Three (3) business days prior to a scheduled appointment time.

Unless prior arrangements are made, NO testing will be conducted in the presence of a stenographer, third, party observer, or any electronic recording device.

By signing below, you agree to the terms stated above. Keep a copy for your records and forward a signed copy to my office with appropriate fees. Please do not hesitate to contact my office if you have any questions.

\_\_\_\_\_  
Attorney of Record for \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Marnee Schneider, Psy.D.  
Licensed Psychologist- PY 6833  
Tax Identification Number: 20-3332894

\_\_\_\_\_  
Date