**[YOUR LOGO & COMPANY NAME HERE]**

**Contract for Paralegal Services**

This Contract for Services is made effective as of date by and between your name or your company’s name. (the “Provider”), and the client’s name (the “Recipient”).

1. DESCRIPTION OF SERVICES. Beginning on date , you or your company will provide virtual contract Legal Assistant work for the client’s name under the supervision of Attorney (collectively, the “Services”). Services will be provided on an as-needed basis.
2. HOURLY RATES. In exchange for services, Provider charges $\_\_\_\_ per hour, which will be billed every two weeks starting on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
3. PAYMENT. Recipient will pay Provider for services rendered using PayPal , net \_\_\_\_\_ days (or per month) upon receipt of timesheet unless otherwise arranged.
4. TERM. This Contract will terminate on \_\_\_\_\_\_\_\_\_\_\_\_. Recipient has the right to extend this contract upon agreement of the Provider and Recipient. All parties to this Contract have the right to cancel the Contract at any time.
5. CONFIDENTIALITY. The Provider agrees to keep confidential ALL disclosures and proprietary information of the Recipient, its clients, files, contacts, documents, financial information, and any other confidential and/or proprietary information. The Provider shall hold and maintain the confidential information in strictest confidence for the sole and exclusive benefit of the Recipient. Provider shall not, without prior written approval, use or permit to be used Recipient’s letterhead, name, or any branded materials of Recipient. Provider shall not, without prior written approval of the Recipient, use for Provider’s own benefit, publish, copy, or otherwise disclose to others, or permit the use by others for her benefit or to the detriment of the Recipient, any confidential and/or proprietary information. The confidentiality provision of this Contract shall survive the termination of this Contract and Provider’s duty to hold confidential information in confidence shall remain in effect until written termination. Provider agrees to secure all passwords and file access information and to immediately report to Recipient any breach, attempted breach, or compromise to the security and confidentiality of information.
6. LIMITATIONS. Provider shall not contact or attempt to contact any client, provider, affiliate, consultant, expert or witness for Recipient or any client of Recipient without express instruction, request or direction of Recipient.
7. EQUIPMENT. Provider agrees to maintain all necessary equipment and facilities necessary to maintain secure communications and transmission of data and information, including but not limited to high-speed, password encrypted Wi-Fi or Internet access.
8. RELATIONSHIPS. Nothing contained in this Contract for Services shall be deemed to constitute either party a partner, joint venture or employee of the other party for any purpose. This contact for services is entered into willfully and mutually by all parties and is terminable at-will be either the Provider or the Recipient.
9. GOVERNING LAW. This Contract shall be construed in accordance with the laws of your state .
10. ENTIRE CONTRACT. This Contract contains the entire agreement of the Provider and Recipient, and there are no other promises or conditions in any other agreement whether oral or written concerning the subject matter of this Contract.
11. SEVERABILITY. If any provision of this Contract will be held to be invalid or unenforceable for any reason, the remaining provisions will continue to be valid and enforceable. If a court finds that any provision of this Contract is invalid or unenforceable, but that by limiting such provision it would become valid and enforceable, then such provision will be deemed to be written, construed, and enforced as so limited.

Each party has signed this Contract voluntarily and agrees that an e-signature shall be deemed valid and equal to an original signature.

Service Provider: you or your company name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By: YOUR NAME

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Service Recipient: your client’s name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By: YOUR CLIENT’S NAME

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_