

RELEASE OF INFORMATION - EXPERT WITNESS

Purpose

The purpose of this release of information is to waive any privilege associated between Mares Cares Counseling, LLC, employee(s) and client so that the emploerapist may disclose facts or opinions held as an expert in order to testify in a court proceeding pursuant to the Ohio Rules of Civil Procedure, Rule 45. Subpoena, section C(3)(c) pertaining to the person(s) identified below:

Name: _____ Date of Birth: _____
Name: _____ Date of Birth: _____
Name: _____ Date of Birth: _____
Name: _____ Date of Birth: _____
Name: _____ Date of Birth: _____
Name: _____ Date of Birth: _____
Name: _____ Date of Birth: _____

Requesting Party Information

Name of Requesting Party: _____
Case Number: _____ County: _____
Attorney Name: _____
Phone: _____ Fax: _____ Email: _____

Description of Information to be Disclosed

(Please check each item to be disclosed)

- Assessment/Diagnosis Treatment Plan or Summary
 Medication Management Information Presence/Participation in Treatment
 Psychotherapy Notes
 Other (Specify) _____

Rates

Court preparation: Usual and customary rate posted online at mares-cares.com/rates.

Court appearance: Usual and customary rate x 1.25, plus mileage (\$0.625 per mile driven to/from courthouse from home or office).

Retainer

A \$750.00 retainer must be received at least five (5) business days prior to the court appearance date to allow sufficient time to prepare and to re-schedule existing appointments. The retainer shall be made payable to *Mares Cares Counseling, LLC*, include the requesting party's name in the memo line, and postal mailed to: Mares Cares Counseling, LLC, ATTN: Alvin Mares, 628 Commanche Rd, Chillicothe, OH 45601.

Authorizing Party Signature

Date