

Jillian Sokoloff M.A.
334 Washington Drive
Cottage Grove, Oregon 97424

Life Coach

Payment Agreement

In consideration of professional services rendered, I the undersigned, do hereby agree to the following payment arrangement with Jillian Sokoloff M.A.,

I am responsible for a fee of ___\$80 per session. Cash, check or money orders are accepted. Payments are due at the beginning of each session.

I understand that I am solely responsible for the agreed upon fee.

Signature

Date

Name: _____

Address: _____