

DEPOSIT REQUEST



Invoice Date
3/10/2020

Invoice Number
5180118

Bill To: **Ms. Angela Freiner**

'
US

Reference #: 1335000146 - Rep# 3
Billing Specialist: **Oliff, Sandra**
Email: soliff@jamsadr.com
Telephone: **949-224-4612**
Employer ID: **68-0542699**

RE: **Freiner, Angela vs. Judy, James**
Representing:

Neutral(s): **Hon. Douglas Beach (Ret.)**
Hearing Type: **MEDIATION** LS

Date / Time	Description	Your Share
3/10/20	Hon. Douglas R Beach (Ret.) Deposit for services: To be applied to professional time (session time, pre and post session reading, research, preparation, conference calls, travel, etc.), expenses, and case management fees. Failure to pay the deposit by the due date may result in a delay in service or cancellation of the session. With the exception of non-refundable fees, (Please review the Neutral's fee schedule regarding case management fee and cancellation policies), any unused portion of this deposit will be refunded at the conclusion of the case.	\$ 1,200.00

Total Billed:	\$ 1,200.00
Total Payment:	\$ 0
Balance:	\$ 1,200.00

Unused deposits will not be refunded until the conclusion of the case. If the case cancels or continues, fees are due per our cancellation and continuance policy. Please make checks payable to JAMS, Inc. **Payment is due upon receipt.**

[Click here to pay](#)

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P.O. Box 845402
Los Angeles, CA 90084

Overnight mail:
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Irvine, CA 92612