



Katherine Latter Counseling, PC —*seeing you through the seasons of your life*

FEE SCALE FOR PROFESSIONAL COUNSELING SERVICES

The following chart will help you determine cost for your individual, couple, or family counseling services. Please consider the monthly income listed below and indicate the coordinating session fee price.

Net Monthly Income	Session Fee
\$4101 and above	\$100.00
\$3701-\$4100	\$95.00
\$3301-\$3700	\$90.00
\$2901-\$3300	\$85.00
\$2501-\$2900	\$80.00
\$2101-\$2500	\$75.00
\$1701-\$2100	\$70.00
\$1700 and Below	\$65.00

Please initial each of the following statements:

_____ Based on the above fee scale, my hourly counseling fee is \$ _____ per session. I agree to pay this amount at the beginning of each session.

_____ I fully understand and agree that if I cancel my session less than 24-hours before my given appointment, I am responsible for the full fee of \$ _____, as agreed to and signed on the Client Consent and Personal Disclosure Statement.

_____ I understand that the set counseling fee can be reviewed every three months, should my financial situation change.

CLIENT PRINTED NAME

CLIENT SIGNATURE

COUNSELOR SIGNATURE

DATE

DATE