

EXHIBIT 7

Montera v. Premier Nutrition, Case No. 3:16-CV-06980 RS
Blood Hurst & O'Reardon, LLP

Experts & Consultants: \$609,582.93 (Nontaxed Amount Sought)

Expert / Consultant	Total Cost	Total Sought	Nontaxed Sought
Timothy McAlindon, MD, MPH	\$112,256.94	\$112,256.94	\$112,256.94
Farshid Guilak, Ph.D.	\$20,400.00	\$20,400.00	\$20,400.00
Derek D. Rucker, Ph.D.	\$98,700.75	\$98,700.75	\$98,700.75
Colin B. Weir	\$73,691.80	\$73,691.80	\$73,691.80
J. Michael Dennis, Ph.D.	\$87,516.50	\$87,516.50	\$87,516.50
Steven R Graboff, M.D.	\$40,612.50	\$40,612.50	\$40,612.50
Jeremiah E. Silbert, M.D.	\$58,692.50	\$58,692.50	\$58,692.50
Lynn R. Willis, Ph.D.	\$26,500.00	\$26,500.00	\$26,500.00
Mark Keegan	\$68,159.09	\$68,159.09	\$68,159.09
Thomas J. Maronick, DBA, JD	\$37,675.00	\$0	\$0
Robert Wallace	\$18,587.50	\$0	\$0
VideoTrack Litigation & Trial Support	\$49,140.07	\$49,140.07	\$45,379.10
Hal Poret	\$4,025.00	\$4,025.00	\$4,025.00
Chopra Koonan	\$5,236.25	\$5,236.25	\$5,236.25
Total	\$695,957.65	\$613,343.90	\$609,582.93

[Print](#)

[Close](#)

Joint Juice

From: **Tommy O'Reardon** (TOReardon@bholaw.com)
Sent: Wed 8/06/14 4:05 PM
To: 'Janet Harrison (msdalmation@msn.com)' (msdalmation@msn.com)
Cc: Tim Blood (TBlood@bholaw.com); Janet Kohnenberger (jkohnenberger@bholaw.com)
1 attachment
[Signed] Jeramiah Silbert W-9 Form (00075764xBDE34).pdf (71.4 KB)

Please send a retainer check of \$4,500 to Dr. Silbert. His W9 is attached. Thanks.

*pd 8/7/14
4/18/1*

American Orthopaedic Association
 Surgical Medical Group
 Steven R. Graboff, M.D. Inc.

STATEMENT OF ACCOUNT

Attention: Thomas J. O'Reardon Esq.
 Company Name: Thomas J. O'Reardon Esq.
 Address 1: 701 B Street
 Address 2: Suite 1700
 City, State: San Diego, CA
 Zip Code: 92101

Date: August 15, 2014
 Patient/Case Name: Vincent Mullins
 Account Number: 967747

JOINT JUICE

Previous Balance:
 New Charges: \$11,750.00

BALANCE DUE:	\$11,750.00
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Date	Itemized Description of Services	Cost
08/06/14	Retainer	-\$2,500.00
08/15/14	Review of Records 30Hr	\$14,250.00
		<u>11750.00</u>
	This review was done over several days	
	TOTAL AMOUNT DUE IN OUR OFFICE 8-27-14 TAX ID# 33-0194026	
	Our New address starting September 1st 2014 will be: 17742 Beach Blvd #355 Huntington Beach, CA 92647	

pd 8/27/14
4234

Blood, Hurst & O'Reardon LLP

Steven R. Graboff, M.D.

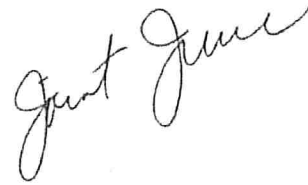
5181 · CLIENT COSTS-OTHER

Initial Retainer

8/1/14

4177

2,500.00



UNION BANK - GENE Retainer - Mullins v. Premier Nutrition Corp.

2,500.00

REORDER:(760)804-8088 NANCY WILSON UCS#733570

[Print](#)

[Close](#)

FW: Joint Juice

From: Tommy O'Reardon (TOReardon@bholaw.com)
Sent: Mon 8/04/14 9:46 AM
To: 'Janet Harrison (msdalmation@msn.com)' (msdalmation@msn.com)
Cc: Tim Blood (TBlood@bholaw.com)
1 attachment
Form W-9.pdf (2.0 MB)

Here's a W9 for an expert in Joint Juice. Can you please make out a retainer check to Dr. Willis for \$5k?
Thanks.

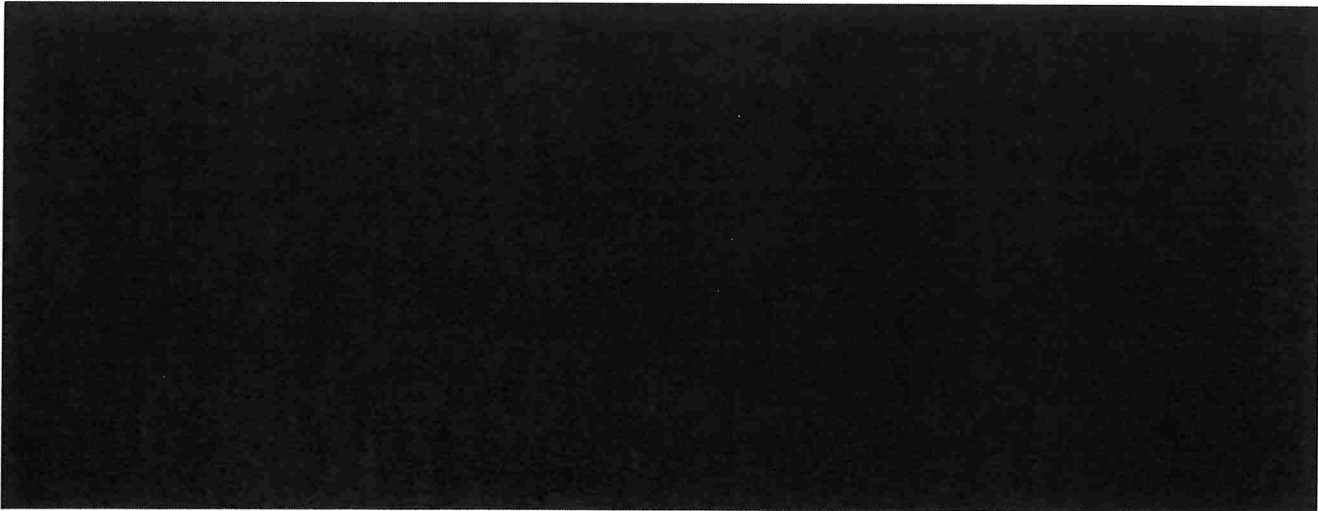
From: Willis, Lynn R. [mailto:willis@iupui.edu]
Sent: Monday, August 04, 2014 7:15 AM
To: Tommy O'Reardon
Subject: Re: Joint Juice

*M 8/19/14
#4208*

Tommy,

I've attached a signed copy of my W-9 form, and I'm looking forward to getting to work on the Joint Juice case.

Lynn



To J. J. O'Reardon

From JEREMIAH SILBERT

Enclosed is a copy of my **HOURS**.
Thanks

Re: Joint Juice

7/21	Telephone discussion	12-12:45 PM	
7/22	Inspecting Joint Juice at store	10-11 AM	
7/29	Reviewing information in the class action complaint	11-12 AM	1 hour
7/29	Examining and copying Joint Juice computer advertising and statements	6-7 PM	1 hour
8/1	Examining Joint Juice expert statement in opposition	11-12 AM	1 hour
	Working on my statement	1-3 PM	2 hour
8/3		2-4, 6-10:30 PM	6 hour
8/3		2-4, 6-9:30 PM	6 hour
8/4	Finishing and packing	9-11 AM	2 hour

Total 18.0
 X 450.00

8100.00

LESS REIMBURSEMENT - 4500.00

3600.00

PA 8/7/14
 #4181

PA 9/10/14
 #4255

1500 BLOOD HURST & O'REARDON
 701 B STREET
 HEALTH INSURANCE PLAN
 SAN DIEGO, CA 92101

pd 1/28/15 #4504

CARRIER
PATIENT AND INSURED INFORMATION
PHYSICIAN OR SUPPLIER INFORMATION

1. MEDICARE <input type="checkbox"/> MEDICAID <input type="checkbox"/> TRICARE CHAMPUS (Sponsor's SSN) <input type="checkbox"/> CHAMPVA <input type="checkbox"/> GROUP HEALTH PLAN (SSN or ID) <input type="checkbox"/> FECA BLK LUNG (SSN) <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		1a. INSURED'S I.D. NUMBER (For Program in Item 1)	
2. PATIENT'S NAME (Last Name, First Name, Middle Initial) MULLINS, VINCENT		3. PATIENT'S BIRTH DATE 01 01 01	
5. PATIENT'S ADDRESS (No., Street) CITY STATE ZIP CODE TELEPHONE (Include Area Code)		4. INSURED'S NAME (Last Name, First Name, Middle Initial) MULLINS, VINCENT	
8. PATIENT STATUS Single <input type="checkbox"/> Married <input type="checkbox"/> Other <input checked="" type="checkbox"/>		7. INSURED'S ADDRESS (No., Street) CITY STATE ZIP CODE TELEPHONE (Include Area Code)	
9. OTHER INSURED'S NAME (Last Name, First Name, Middle Initial)		10. IS PATIENT'S CONDITION RELATED TO:	
a. OTHER INSURED'S POLICY OR GROUP NUMBER		a. EMPLOYMENT? (Current or Previous)	
b. OTHER INSURED'S DATE OF BIRTH MM DD YY SEX M <input type="checkbox"/> F <input type="checkbox"/>		b. AUTO ACCIDENT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> PLACE (State)	
c. EMPLOYER'S NAME OR SCHOOL NAME		c. OTHER ACCIDENT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
d. INSURANCE PLAN NAME OR PROGRAM NAME		10d. RESERVED FOR LOCAL USE	
READ BACK OF FORM BEFORE COMPLETING & SIGNING THIS FORM.			
12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to my self or to the party who accepts assignment below.		13. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier for services described below.	
SIGNED SIGNATURE ON FILE DATE 01 23 15		SIGNED SIGNATURE ON FILE	
14. DATE OF CURRENT ILLNESS (First symptoms) OR INJURY (Accident) OR PREGNANCY (LMP)		15. IF PATIENT HAS HAD SAME OR SIMILAR ILLNESS GIVE FIRST DATE MM DD YY	
17. NAME OF REFERRING PROVIDER OR OTHER SOURCE BLOOD HURST & O'REARDON		18. DATES PATIENT UNABLE TO WORK IN CURRENT OCCUPATION FROM MM DD YY TO MM DD YY	
19. RESERVED FOR LOCAL USE		13. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM DD YY TO MM DD YY	
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate Items 1, 2, 3 or 4 to Item 24E by Line)		20. OUTSIDE LAB? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> CHARGES 0.00	
1. 99999		22. MEDICAID RESUBMISSION CODE ORIGINAL REF. NO.	
2.		23. PRIOR AUTHORIZATION NUMBER	
24. A. DATE(S) OF SERVICE From MM DD YY To MM DD YY		B. PLACE OF SERVICE	
C. EMG		D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) MODIFIER	
E. DIAGNOSIS POINTER		F. CHARGES	
G. DAYS OR UNITS		H. EXPECTED PAY PERCENT	
I. ID QUAL		J. RENDERING PROVIDER ID #	
01 23 15 01 23 15 11 01 C25 1 950.00 2. N N		REVIEW OF RECORDS	
01 23 15 01 23 15 11 01 C221 1 3562.50 7.5 N N		REVIEW EDIT CREATE DR. GRABOFF'S EXPERT Report	
25. FEDERAL TAX I.D. NUMBER 330194026		26. PATIENT'S ACCOUNT NO. 967747	
27. ACCEPT ASSIGNMENT? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		28. TOTAL CHARGE \$ 4512.50	
29. AMOUNT PAID \$ 0.00		30. BALANCE DUE \$ 4512.50	
31. SIGNATURE OF PHYSICIAN OR SUPPLIER STEVEN R GRABOFF MD		32. BILLING PROVIDER INFO & ID # STEVEN R GRABOFF MD INC	
33. SERVICE FACILITY LOCATION INFORMATION 17742 Beach Blvd. Ste 355		34. HUNTINGTON BEACH, CA 92647	
SIGNED 01 23 15		G45318	

*American Orthopaedic Association
Surgical Medical Group
Steven R. Graboff, M.D. Inc.*

STATEMENT OF ACCOUNT

Attention: Thomas J. O'Reardon
 Company Name: Blood, Hurst & O'Reardon
 Address 1: 701 B Street
 Address 2: Suite 1700
 City, State: San Diego, CA
 Zip Code: 92101

Date: December 12, 2014
 Patient/Case Name: Vincent Mullins
 Account Number: 967747

Previous Balance:
 New Charges: \$350.00

Dr. Vincent Mullins

BALANCE DUE: \$350.00

Date	Itemized Description of Services	Cost
12/11/14	Telephone Consult 0.50Hr	\$350.00
TOTAL AMOUNT DUE IN OUR OFFICE NOW		
Tax ID# 33-0194026		
Our new address is: 17742 Beach Blvd #355 Huntington Beach, CA 92647		

1500 BLOOD HURST & O'REARDON
 701 B STREET
 HEALTH INSURANCE CLAIM FORM
 APPROVED BY NATIONAL MEDICARE SAN DIEGO, CA 92101

<input type="checkbox"/> MEDICARE <input type="checkbox"/> MEDICAID <input type="checkbox"/> TRICARE CHAMPUS (Sponsor's SSN) <input type="checkbox"/> CHAMPVA (Member ID#) <input type="checkbox"/> GROUP HEALTH PLAN (SSN or ID) <input type="checkbox"/> FECA BLK LUNG (SSN) <input checked="" type="checkbox"/> OTHER (ID#)										1a. INSURED'S ID NUMBER (For Program in Item 1)																			
2. PATIENT'S NAME (Last Name, First Name, Middle Initial) MULLINS, VINCENT										3. PATIENT'S BIRTH DATE MM/DD/YY SEX 01/01/01 M										4. INSURED'S NAME (Last Name, First Name, Middle Initial) MULLINS, VINCENT									
5. PATIENT'S ADDRESS (No., Street) CITY STATE ZIP CODE TELEPHONE (Include Area Code)										6. PATIENT RELATIONSHIP TO INSURED Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Other <input type="checkbox"/>										7. INSURED'S ADDRESS (No., Street) CITY STATE ZIP CODE TELEPHONE (Include Area Code)									
9. OTHER INSURED'S NAME (Last Name, First Name, Middle Initial)										10. IS PATIENT'S CONDITION RELATED TO: a. EMPLOYMENT? (Current or Previous) YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>										11. INSURED'S POLICY GROUP OR FECA NUMBER									
a. OTHER INSURED'S POLICY OR GROUP NUMBER										b. AUTO ACCIDENT? YES <input type="checkbox"/> NO <input type="checkbox"/> PLACE (State)										a. INSURED'S DATE OF BIRTH MM/DD/YY SEX 01/01/01 M									
b. OTHER INSURED'S DATE OF BIRTH MM/DD/YY SEX M <input type="checkbox"/> F <input type="checkbox"/>										c. OTHER ACCIDENT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>										b. EMPLOYER'S NAME OR SCHOOL NAME									
c. EMPLOYER'S NAME OR SCHOOL NAME										d. RESERVED FOR LOCAL USE										c. INSURANCE PLAN NAME OR PROGRAM NAME									
4. INSURANCE PLAN NAME OR PROGRAM NAME										12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts assignment below. SIGNED SIGNATURE ON FILE DATE 12 05 14										4. IS THERE ANOTHER HEALTH BENEFIT PLAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO // yes, return to and complete item 9 a-d									
14. DATE OF CURRENT ILLNESS (First symptom) OR INJURY (Accident) OR PREGNANCY (LMP)										15. IF PATIENT HAS HAD SAME OR SIMILAR ILLNESS, GIVE FIRST DATE MM/DD/YY										13. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier for services described below. SIGNED SIGNATURE ON FILE									
17. NAME OF REFERRING PROVIDER OR OTHER SOURCE BLOOD HURST & O'REARDON										16. DATES PATIENT UNABLE TO WORK IN CURRENT OCCUPATION FROM MM/DD/YY TO MM/DD/YY										18. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM/DD/YY TO MM/DD/YY									
19. RESERVED FOR LOCAL USE										20. OUTSIDE LAB? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> \$ CHARGES 0.00										22. MEDICAID RESUBMISSION CODE ORIGINAL REF NO									
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate Items 1, 2, 3 or 4 to Item 24E by Line)										23. PRIOR AUTHORIZATION NUMBER										24. A. DATES(S) OF SERVICE From MM/DD/YY To MM/DD/YY B. PLACE OF SERVICE C. EMG D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) E. DIAGNOSIS POINTER F. \$ CHARGES G. DAY'S OR UNITS H. EPSDT Party Pwr I. ID QUAL J. RENDERING PROVIDER ID #									
1 99999										12 05 14 12 05 14 11 01 C25 1 475.00 1. N N										REVIEW OF RECORDS									
25. FEDERAL TAX I.D. NUMBER 330194026										26. PATIENT'S ACCOUNT NO 967747										27. ACCEPT ASSIGNMENT? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>									
28. TOTAL CHARGE \$ 475.00										29. AMOUNT PAID \$ 0.00										30. BALANCE DUE \$ 475.00									
31. SIGNATURE OF PHYSICIAN OR SUPPLIER (Including Degrees or Credentials) STEVEN R GRABOFF MD										32. BILLING PROVIDER ID # 7148430019										33. BILLING PROVIDER NAME STEVEN R GRABOFF MD INC									
17742 Beach Blvd. Ste 355 HUNTINGTON BEACH, CA 92647										17742 Beach Blvd., Ste 355 HUNTINGTON BEACH, CA 92647										19 05 14									
SIGNED DATE										a. b. G45318										c. d.									

CARRIER
PATIENT AND INSURED INFORMATION
PHYSICIAN OR SUPPLIER INFORMATION

pd 12/17/14 #4425

re: Joint Juice

Invoice for Consulting Services Rendered as an Expert
Witness in Mullins vs. Premier Nutrition Corp.
Lynn R. Willis, Ph.D.

August 9, 2014 – January 30, 2015

- Fee for service:
- 1) Critical review and evaluation of clinical studies of glucosamine/chondroitin (Joint Juice);
 - 2) Review of clinical literature on glucosamine and chondroitin;
 - 3) Review and analysis of declaration by David A. Grande, Ph.D.;
 - 4) Review of references and other literature submitted by Premier Nutrition Corp.;
 - 5) Review of plaintiff's exhibits, etc.;
 - 6) Writing and submission of a Declaration for Plaintiff's Motion for Class Certification;
 - 7) Writing and submission of a Supplemental Declaration assessing the merits of Defendant's promotional claims for Joint Juice and rebutting Dr. Grande's declaration.

Work on Class Certification Declaration	
August 9, 2014 – August 26, 2014	
18 hours @ \$500 per hour -----	\$ 9,000.00
Work on Supplemental Declaration	
January 13, 2015 – January 30, 2015	
35 hours @ \$500 per hour -----	<u>\$ 17,500.00</u>
Total	\$ 26,500.00
Less Retainer	<u>- \$ 5,000.00</u>
Grand Total	\$ 21,500.00

Thank you,

Lynn R. Willis, Ph.D.
755 E. 96th Street
Indianapolis, IN 46240

*PA 2/11/15
#4520*

1500 BLOOD HURST & O'REARDON
 701 B STREET
 HEALTH INSURANCE CLAIM FORM
 APPROVED BY MAIL SAN DIEGO, CA 92101

1 MEDICARE <input type="checkbox"/> MEDICAID <input type="checkbox"/> TRICARE <input type="checkbox"/> CHAMPVA <input type="checkbox"/> GROUP HEALTH PLAN <input type="checkbox"/> FECA <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>										1a INSURED'S ID NUMBER (For Program in Item 1)									
2 PATIENT'S NAME (Last Name, First Name, Middle Initial) MULLINS, VINCENT										3 PATIENT'S BIRTH DATE 01 01 01 SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F									
5 PATIENT'S ADDRESS (No., Street) CITY STATE ZIP CODE TELEPHONE (Include Area Code)										6 PATIENT RELATIONSHIP TO INSURED Self <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Other <input type="checkbox"/>									
9 OTHER INSURED'S NAME (Last Name, First Name, Middle Initial)										10 IS PATIENT'S CONDITION RELATED TO:									
a OTHER INSURED'S POLICY OR GROUP NUMBER										a EMPLOYMENT? (Current or Previous)									
b OTHER INSURED'S DATE OF BIRTH MM DD YY SEX M <input type="checkbox"/> F <input type="checkbox"/>										b AUTO ACCIDENT? YES <input type="checkbox"/> NO <input type="checkbox"/> PLACE (State)									
c EMPLOYER'S NAME OR SCHOOL NAME										c OTHER ACCIDENT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>									
d INSURANCE PLAN NAME OR PROGRAM NAME										10d RESERVED FOR LOCAL USE									
12 PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts assignment below.										13 INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier for services described below.									
SIGNED SIGNATURE ON FILE DATE 01 30 15										SIGNED SIGNATURE ON FILE									
14 DATE OF CURRENT ILLNESS (First symptoms) OR INJURY (Accident) OR PREGNANCY (LMP)										15 IF PATIENT HAS HAD SAME OR SIMILAR ILLNESS GIVE FIRST DATE MM DD YY									
17 NAME OF REFERRING PROVIDER OR OTHER SOURCE BLOOD HURST & O'REARDON										18 HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM DD YY TO MM DD YY									
21 DIAGNOSIC OR NATURE OF ILLNESS OR INJURY (Relate items 1, 2, 3 or 4 to Item 21E by Line)										22 MEDICAID RESUBMISSION CODE ORIGINAL REF NO									
1 99999										23 PRIOR AUTHORIZATION NUMBER									
24 A DATE(S) OF SERVICE From MM DD YY To MM DD YY										B PLACE OF SERVICE									
1 01 30 15 01 30 15										C. ENG									
1 11 01										D PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS MODIFIER									
1 C25										E DIAGNOSIS POINTER									
1 1										F \$ CHARGES									
1 1425.00										G. DAYS OR UNITS									
1 3										H. EPSE Part									
1 N										I. IC CLAL									
1 NPI										J RENDERING PROVIDER ID #									
25 FEDERAL TAX ID NUMBER 330194026										26 PATIENT'S ACCOUNT NO. 967747									
27 ACCEPT ASSIGNMENT? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>										28 TOTAL CHARGE \$ 1425.00									
29 AMOUNT PAID \$ 0.00										30 BALANCE DUE \$ 1425.00									
31 SIGNATURE OF PHYSICIAN OR SUPPLIER STEVEN R GRABOFF MD										32 BILLING PROVIDER ID # 7148430019									
01 30 15										STEVEN R GRABOFF MD INC 17742 BEACH BLVD., STE 355 HUNTINGTON BEACH, CA 92647									

Handwritten: M 2/11/15 #4526

CARRIER
PATIENT AND INSURED INFORMATION
PHYSICIAN OR SUPPLIER INFORMATION

CMS-10179 (01-02) (OCR) 1PT

KEEGAN & DONATO
CONSULTING, LLC

M/2/25/15
#4552
\$21,683.25

From Keegan & Donato Consulting
LLC
31 Purchase Street, Suite 3-4
Rye, NY 10580
(914) 417-4942
mark@keegandonato.com
Tax ID: 45-2568702

Invoice ID 10926
Issue Date 12/16/2014
Due Date 12/16/2014 (upon receipt)
Subject Vincent D. Mullins v. Premier Nutrition Corporation f.k/a/ Joint Juice, Inc.

Invoice For Mr. Thomas J. O'Reardon II,
Esq.
Blood Hurst & O'Reardon LLP
701 B Street, Suite 1700
San Diego, CA 92101

Type	Description	Quantity	Rate	Amount
Consulting	09/03/2014 - Tony Donato: Review case documents; Internal conference; Assistance with report drafting.	4.10	\$275.00	\$1,127.50
Consulting	09/03/2014 - Mark Keegan: Document review; report drafting.	2.84	\$350.00	\$994.00
Consulting	09/05/2014 - Tony Donato: Review case documents; Assistance with report drafting.	2.32	\$275.00	\$638.00
Consulting	10/07/2014 - Tony Donato: Assistance with report drafting.	1.31	\$275.00	\$360.25
Consulting	10/16/2014 - Tony Donato: Review case documents; Assistance with report drafting.	2.89	\$275.00	\$794.75
Consulting	10/16/2014 - Mark Keegan: Conferencing; report drafting.	3.86	\$350.00	\$1,351.00
Consulting	10/20/2014 - Tony Donato: Review case documents; Assistance with report.	3.12	\$275.00	\$858.00
Consulting	10/22/2014 - Tony Donato: Assistance with report drafting; Review case documents.	6.44	\$275.00	\$1,771.00
Consulting	10/23/2014 - Tony Donato: Assistance with report drafting.	3.53	\$275.00	\$970.75
Consulting	10/23/2014 - Mark Keegan: Report drafting.	1.19	\$350.00	\$416.50
Consulting	10/28/2014 - Tony Donato: Internal conferencing; Assistance with report drafting; Review case materials.	3.39	\$275.00	\$932.25
Consulting	10/29/2014 - Tony Donato: Review case materials; Assistance with report drafting and editing.	4.20	\$275.00	\$1,155.00
Consulting	10/30/2014 - Tony Donato: Assistance with report drafting.	1.20	\$275.00	\$330.00

Type	Description	Quantity	Rate	Amount
Consulting	10/31/2014 - Mark Keegan: Study review; report drafting.	2.39	\$350.00	\$836.50
Consulting	10/31/2014 - Tony Donato: Internal conferencing; Assistance with report drafting.	1.28	\$275.00	\$352.00
Consulting	11/03/2014 - Tony Donato: Assistance with report; Review case documents.	3.32	\$275.00	\$913.00
Consulting	11/04/2014 - Mark Keegan: Report review and drafting.	1.33	\$350.00	\$465.50
Consulting	11/04/2014 - Tony Donato: Assistance with report drafting; Review case documents.	4.20	\$275.00	\$1,155.00
Consulting	11/05/2014 - Tony Donato: Assistance with report drafting; Internal conference.	2.06	\$275.00	\$566.50
Consulting	11/06/2014 - Mark Keegan: Report drafting.	0.69	\$350.00	\$241.50
Consulting	11/06/2014 - Tony Donato: Internal conferencing; Assistance with report drafting.	2.25	\$275.00	\$618.75
Consulting	11/07/2014 - Mark Keegan: Report drafting.	0.57	\$350.00	\$199.50
Consulting	12/08/2014 - Tony Donato: project assistance.	1.08	\$275.00	\$297.00
Consulting	12/09/2014 - Mark Keegan: Report drafting.	2.19	\$350.00	\$766.50
Consulting	12/09/2014 - Tony Donato: Assistance with report drafting & editing; Teleconference with Mr. O'Reardon, Mr. Blood.	1.14	\$275.00	\$313.50
Consulting	12/10/2014 - Tony Donato: Assistance with report drafting.	2.16	\$275.00	\$594.00
Consulting	12/11/2014 - Tony Donato: Assistance with report drafting; Internal conferencing.	2.78	\$275.00	\$764.50
Consulting	12/11/2014 - Mark Keegan: Report writing.	0.34	\$350.00	\$119.00
Consulting	12/12/2014 - Mark Keegan: Report drafting.	1.02	\$350.00	\$357.00
Consulting	12/12/2014 - Tony Donato: Assistance with report drafting & editing.	0.58	\$275.00	\$159.50
Consulting	12/15/2014 - Mark Keegan: Report drafting and finalization.	1.10	\$350.00	\$385.00
Consulting	12/15/2014 - Tony Donato: Internal conferencing; Teleconference with Mr. O'Reardon, Assistance with declaration editing and finalization.	3.20	\$275.00	\$880.00
			Amount Due	\$21,683.25

Summary of work and hours.

January.

14	Received copy of Grande	
15	Reviewing previous, scanning Grande 2 - 3, 6 - 7:30 PM	2-1/2 hours
17	Background, Qualifications 1 - 5 PM	4
18	preparing, sending, correcting 12 - 1 PM	1
19	Checking reprints for use, Grande references 3 - 6:30, 9 - 10:30 PM	5
	trip to Chatham for reprints 12 - 2 PM	-
20	Response to Grande part I, producers, part III, IV 11-1, 2 - 5, 6 - 9 PM	7
21	Part IV critique continued 11 - 12 AM	1
	back to Boston 1 - 3 PM	-
22	Part IV critique, V Science critique Grande references 9 - 1:30, 2 - 7 PM	8 -1/2
23	Continued 3 - 7:30, 8:30 - 11 PM	7
24	Continued 10:30 - 1, 1:30 - 7 PM	7
25	Continued 10 - 1, 2 - 7, 8 - 10 PM (-3 hours typing problem) 10 - 3	6
26	Continued 10 - 11 AM, 4 - 6, 6:30 - 8:30 PM	5
27	Finishing, proofing, sending 10 - 12 AM, 2 - 7 PM (-3 problems) 7 - 3	4

Total 58

Joint Juice

Dr. Jeremiah Silbert

58 hours x \$450/hr

X 450.00

26,100.00

PM 3/10/15
4555

4

KEEGAN & DONATO
CONSULTING, LLC

From: Keegan & Donato
Consulting, LLC
31 Purchase Street, Suite 3-4
Rye, NY 10580
(914) 417-4942
mark@keegandonato.com
Tax ID: 45-2568702

Invoice ID 10943
Issue Date 02/12/2015
Due Date 02/12/2015 (upon receipt)
Subject Vincent D. Mullins v. Premier Nutrition Corporation f/k/a/ Joint Juice, Inc.

Invoice For **Mr. Thomas J. O'Reardon II, Esq.**
Blood Hurst & O'Reardon LLP
701 B Street, Suite 1700
San Diego, CA 92101

*PA 3/25/15
J# 4589*

Type	Description	Quantity	Rate	Amount
Consulting	01/07/2015 - Tony Donato: Review Poret report.	1.29	\$375.00	\$483.75
Consulting	01/09/2015 - Mark Keegan: Review of Poret report.	1.01	\$375.00	\$378.75
Consulting	01/12/2015 - Mark Keegan: Client conference.	2.09	\$375.00	\$783.75
Consulting	01/12/2015 - Tony Donato: Review Poret report; Internal conferencing; Teleconference with Mr. O'Reardon.	1.59	\$375.00	\$596.25
Consulting	01/20/2015 - Tony Donato: Review Poret study; Assistance with report drafting and editing.	3.29	\$375.00	\$1,233.75
Consulting	01/21/2015 - Tony Donato: Assistance with report drafting and editing.	6.34	\$375.00	\$2,377.50
Consulting	01/22/2015 - Tony Donato: Assistance with report drafting and editing.	6.93	\$375.00	\$2,598.75
Consulting	01/23/2015 - Tony Donato: Assistance with report drafting.	4.05	\$375.00	\$1,518.75
Consulting	01/26/2015 - Mark Keegan: Report drafting.	3.52	\$375.00	\$1,320.00
Consulting	01/26/2015 - Tony Donato: Assistance with report drafting.	5.60	\$375.00	\$2,100.00
Consulting	01/27/2015 - Mark Keegan: Report drafting.	3.23	\$375.00	\$1,211.25
Consulting	01/27/2015 - Tony Donato: Assistance with rebuttal report.	4.20	\$375.00	\$1,575.00
Consulting	01/28/2015 - Mark Keegan: Report drafting.	4.30	\$375.00	\$1,612.50
Consulting	01/29/2015 - Tony Donato: Assistance with report drafting; Internal conferencing.	5.12	\$375.00	\$1,920.00

Type	Description	Quantity	Rate	Amount
Consulting	01/29/2015 - Mark Keegan: Report drafting.	4.82	\$375.00	\$1,807.50
Consulting	01/29/2015 - Tony Donato: Assistance with report drafting; Teleconference with Mr. O'Reardon, Mr. Blood; Internal conferencing.	5.59	\$375.00	\$2,096.25
Consulting	01/30/2015 - Tony Donato: Assistance with report finalization; Construction of report exhibits; Internal conferencing.	2.43	\$375.00	\$911.25
Consulting	01/30/2015 - Mark Keegan: Final report review.	1.08	\$375.00	\$405.00
			Amount Due	\$24,930.00

Notes

This invoice may not reflect all courtesy time.

CHECK DETAILS

Account	Check number	Reference	Posted	Amount
[REDACTED]	4741	[REDACTED]	06/12/2015	\$4,025.00

Blood, Hurst & O'Reardon LLP
 701 B Street, Suite 1700
 San Diego, CA 92101
 (619)338-1100

UnionBank
 Payable at any Union Bank branch including
 450 California Street, San Francisco, CA 94104
 (800) 238-4486 unionbank.com
 16-49-51928
 825005410


4741

PAY TO THE ORDER OF **Hal Poret**

\$ **4,025.00**
 DOLLARS

Four thousand twenty-five & $\frac{0}{100}$ cents

MEMO **6/11/15 Deposition**

AUTHORIZED SIGNATURE 

ENDORSE HERE
 Hal Poret
 Dep. P.

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE
 RESERVED FOR FINANCIAL INSTITUTION USE

Security Features Listed Below exceed industry guidelines

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- **Hologram** - Microprint pattern around the number and design from the Federal Reserve
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- **Watermark** - Microprint pattern around the number and design from the Federal Reserve
- **Optical Variable Ink** - Microprint pattern around the number and design from the Federal Reserve
- **Color Shift Ink** - Microprint pattern around the number and design from the Federal Reserve
- **Microprint** - Microprint pattern around the number and design from the Federal Reserve
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American Orthopaedic Association
 Surgical Medical Group
 Steven R. Graboff, M.D. Inc.

STATEMENT OF ACCOUNT

Attention: Thomas J. O'Reardon
 Company Name: Blood, Hurst & O'Reardon L.L.P.
 Address 1: 701 B Street
 Address 2: Suite #1700
 City, State: San Diego, CA
 Zip Code: 92101

Date: June 4, 2015
 Patient/Case Name: Vincent Mullins
 Account Number: 967747

Previous Balance:
 New Charges: \$6,625.00

BALANCE DUE:	\$6,625.00
---------------------	-------------------

Date	Itemized Description of Services	Cost
06/04/15	Dr. Graboff's prep for deposition 11Hr	\$5,225.00
06/04/15	Pre meeting with Dr. Graboff & Attorney Thomas O'Reardon 2Hr	\$1,400.00
Payment is due 1 week prior to the deposition, Please make sure the funds arrive on or before that date.		
TOTAL AMOUNT DUE IN OUR OFFICE BY 7-20-15 Tax ID# 33-0194026		
Our new address is: 17742 Beach Blvd #355 Huntington Beach, CA 92647		

*PA 6/17/15
 # 4754*



KEEGAN & DONATO
CONSULTING, LLC

From **Keegan & Donato Consulting, LLC**
31 Purchase Street, Suite 3-4
Rye, NY 10580
(914) 967-9421
mark@keegandonato.com
Tax ID: 45-2568702

Invoice ID: 10959
Issue Date: 06/23/2015
Due Date: 06/23/2015 (upon receipt)
Subject: Vincent D. Mullins v. Premier Nutrition Corporation f/k/a/ Joint Juice, Inc.

Invoice For **Mr. Thomas J. O'Reardon II, Esq.**
Blood Hurst & O'Reardon LLP
701 B Street, Suite 1700
San Diego, CA 92101

Handwritten: pm 10/27/15 #4983 \$21,545.84

Item Type	Description	Quantity	Rate	Amount
Consulting	06/01/2015 - Tony Donato: Review case documents.	2.13	\$400.00	\$852.00
Consulting	06/01/2015 - Mark Keegan: Case review.	2.41	\$400.00	\$964.00
Consulting	06/02/2015 - Tony Donato: Review case documents; Internal conferencing.	1.94	\$400.00	\$776.00
Consulting	06/02/2015 - Mark Keegan: Depositions review; research.	1.97	\$400.00	\$788.00
Consulting	06/03/2015 - Tony Donato: Review case documents.	1.49	\$400.00	\$596.00
Consulting	06/03/2015 - Mark Keegan: Review of report and supporting materials; rebuttal report review; data analysis.	5.08	\$400.00	\$2,032.00
Consulting	06/04/2015 - Mark Keegan: Case review.	5.03	\$400.00	\$2,012.00
Consulting	06/04/2015 - Tony Donato: Case conferencing; Review case documents.	2.63	\$400.00	\$1,052.00
Consulting	06/05/2015 - Mark Keegan: Deposition preparation.	3.90	\$400.00	\$1,560.00
Consulting	06/05/2015 - Tony Donato: Case conferencing; Review deposition transcripts; Review case documents.	2.90	\$400.00	\$1,160.00
Consulting	06/08/2015 - Tony Donato: Review case documents; Review deposition transcripts; Internal conferencing.	4.30	\$400.00	\$1,720.00
Consulting	06/08/2015 - Mark Keegan: Deposition preparation.	5.05	\$400.00	\$2,020.00
Consulting	06/09/2015 - Mark Keegan: Deposition preparation.	6.19	\$400.00	\$2,476.00

Item Type	Description	Quantity	Rate	Amount
Consulting	06/09/2015 - Tony Donato: Review case documents; Review Poret rebuttal declaration; Review deposition transcripts; Internal conferencing.	4.69	\$400.00	\$1,876.00
Consulting	06/10/2015 - Mark Keegan: Deposition NYC	11.07	\$400.00	\$4,428.00
Expenses	06/09/2015 - Purchase: Costco purchase - Joint Juice	1.00	\$16.59	\$16.59
Expenses	06/10/2015 - Transportation: Train r/t	1.00	\$29.75	\$29.75
			Subtotal	\$24,358.34
			Retainer Payments	-\$1,500.00
			Payments	-\$1,312.50
			Amount Due	\$21,545.84

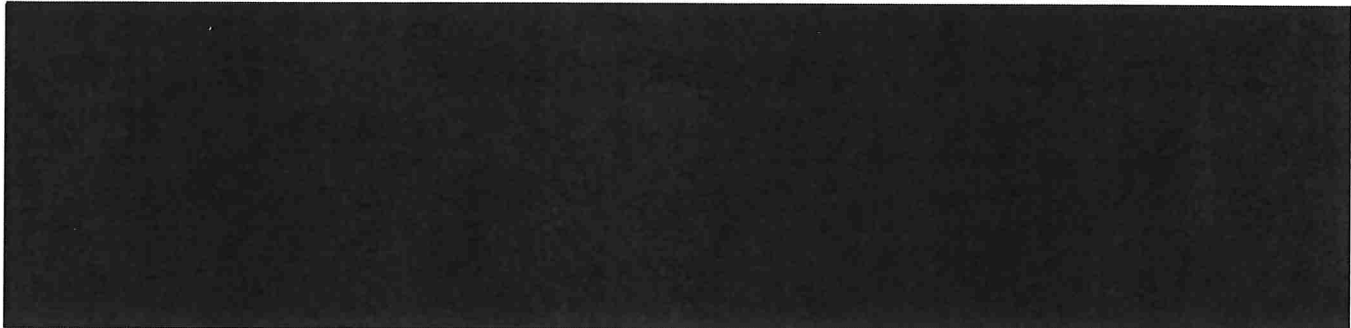
Notes

This invoice may not reflect all courtesy time.

[Print](#)

[Close](#)

FW: Hours



From: jesilbert@aol.com [mailto:jesilbert@aol.com]
Sent: Wednesday, July 15, 2015 4:15 PM
To: Tommy O'Reardon; cksilbert@gmail.com
Subject: Hours

Tommy

These are the hours I spent before the deposition:

June 19 6:00 to 9:00 PM 3 hours

Examining Grande review, some comparison with his previous

June 20 2:00 to 4:30 PM 2 1/2 hours

Getting and examining work of Calamia that Grande quoted. Important

July 1 1:00 to 3:00 PM 2 hours

Discussions for next day deposition

A total of 7 1/2 hours

$$\begin{array}{r} \text{X } 450. \\ = 3375.00 \\ \quad 80.00 \\ \hline 3455.00 \end{array}$$

*pd 7/16/15
#4808*

American Orthopaedic Association
 Surgical Medical Group
 Steven R. Graboff, M.D. Inc.

STATEMENT OF ACCOUNT

Attention: Thomas O'Reardon Esq.
 Company Name: Blood, Hurst & O'Reardon L.L.P.
 Address 1: 701 B Street
 Address 2: Suite #1700
 City, State: San Diego, CA
 Zip Code: 92101

Date: July 27, 2015
 Patient/Case Name: Vincent Mullins
 Account Number: 967747

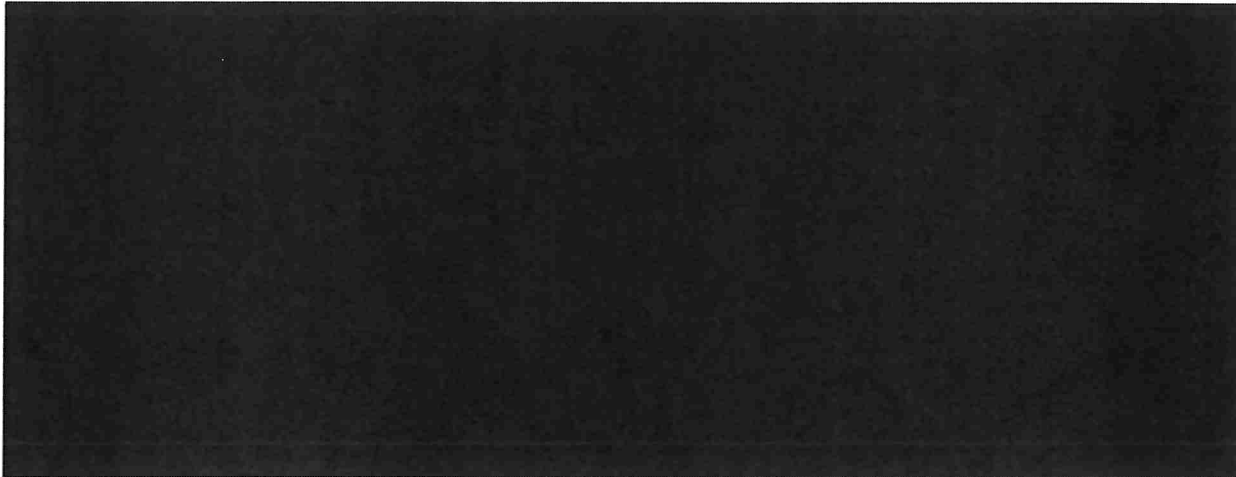
Previous Balance:
 New Charges: \$525.00

re: Joint Juice

BALANCE DUE: \$525.00

Date	Itemized Description of Services	Cost
07/27/15	Pre Meeting With Attorney Thomas O'Reardon & Dr. Graboff 2.75	\$1,925.00
07/27/15	PAID	-\$1,400.00
		<i>525.00</i>
TOTAL AMOUNT DUE IN OUR OFFICE NOW		
Tax ID# 33-0194026		
Our new address is: 17742 Beach Blvd #355 Huntington Beach, CA 92647		
<p><i>PAID 8/12/15</i> <i># 4839</i> <i>(2) = 1000.00</i></p>		

FW: invoice



re: Joint Juice

From: McAlindon, Timothy [mailto:tmcalindon@tuftsmedicalcenter.org]
Sent: Friday, February 17, 2017 10:43 AM
To: Paula Brown <pbrown@bholaw.com>
Cc: 'tmcalindon@gmail.com' (tmcalindon@gmail.com) <tmcalindon@gmail.com>
Subject: invoice

Hi Paula:

Here is my log of time spent so far on the Mullins v. Premier Nutrition project:

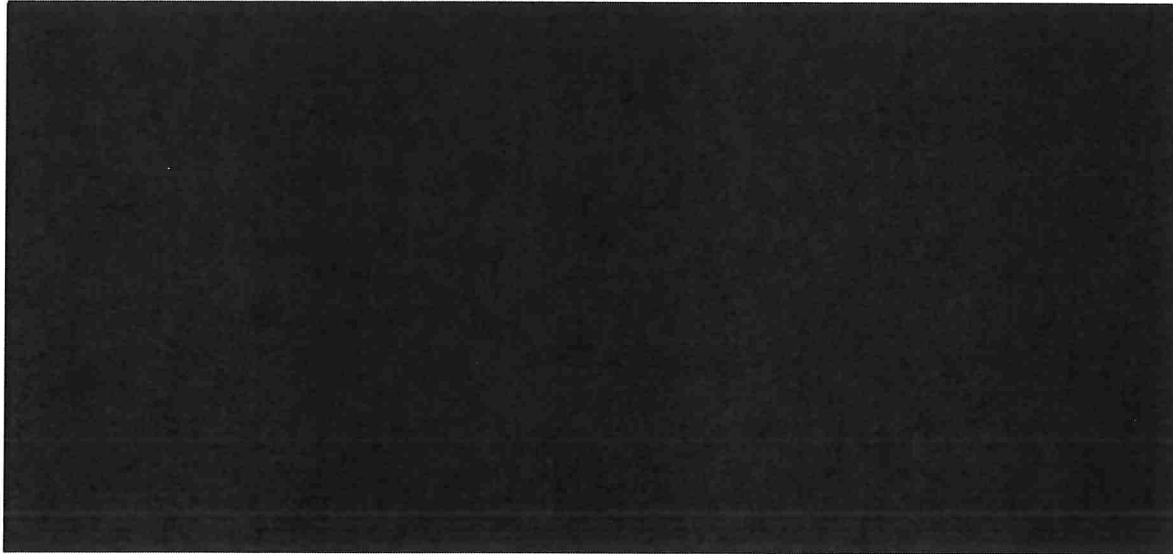
DATE	START	FINISH	HOURS
JAN 6 2017	900	1100	2
JAN 9 2017	900	1000	1
JAN 27 2017	1400	1600	2
30-Jan	1500	1400	1
1-Feb	1500	1600	1
2-Feb	1400	1700	3
3-Feb	1400	1600	2
4-Feb	1030	1130	1
4-Feb	1430	1630	2
5-Feb	1030	1130	1
5-Feb	1530	1630	1
13-Feb	1700	1900	2
13-Feb	2100	2300	2
15-Feb	1730	1830	1
16-Feb	1530	1830	3

*PM 3/8/17
#5908*

Total: 25 hours at \$500/hour = \$12,500

Not sure if I gave you my relevant information

FW: invoice



From: timothy mcalindon [mailto:tmcalindon@gmail.com]
Sent: Monday, March 20, 2017 7:51 AM
To: Paula Brown <pbrown@bholaw.com>
Subject: Re: invoice

Hi Paula

Here is a log of the hours I worked on this project since my last invoice. Does this work?

Thank you

Tim

17-Feb	1500	1700	2	1000
6-Mar	1500	1600	1	1500
10-Mar	1400	1600	2	2500
13-Mar	1500	1700	2	3500
14-Mar	1200	1500	3	5000
16-Mar	1530	1830	3	6500
17-Mar				6500
18-Mar	1100	1700	5	9000
19-Mar	1200	1900	7	12500
TOTAL			25	12500

pm 3/22/17
#5945

On Mar 14, 2017, at 12:55 PM, Paula Brown <pbrown@bholaw.com> wrote:

Hi Tim-

FW: Joint Juice: April Invoice

Tommy O'Reardon <TOReardon@bholaw.com>

Tue 6/6/2017 4:46 PM

to:Janet Harrison <msdalmation@msn.com>;

1 attachments (18 KB)

201704-JointJuice.pdf;

Please pay this \$5k invoice. Thanks!

*PA 6/28/17
#6094*

From: Colin Weir [mailto:cweir@econotech.com]
Sent: Thursday, May 04, 2017 1:59 PM
To: Tommy O'Reardon <TOReardon@bholaw.com>
Subject: Joint Juice: April Invoice

Tommy,

Please see the attached. Thank you.

-C

Colin B. Weir
Economics and Technology
One Washington Mall--15th Floor
Boston MA, 02108
+1-617-598-2226

THIS MESSAGE MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION, COPYING OR COMMUNICATION OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY ME IMMEDIATELY BY TELEPHONE AND DELETE THE MESSAGE.



ECO DYNAMICS AND TECHNOLOGY, INC.

ONE WASHINGTON MALL, 15th Floor
 BOSTON, MASSACHUSETTS 02108 617-598-2200

April 30, 2017

Blood Hurst & O'Reardon, LLP
 Attn: Timothy Blood
 701 B Street, Suite 1700
 San Diego, CA 92101

In Reference To: Joint Juice Litigation
 Invoice # 201706685
 Account # 2216.42831

Week of Professional Services

		<u>Hrs/Rate</u>	<u>Amount</u>
4/3/2017	CBW Review Order granting class certification; review order denying MSJ; review Maronick Declaration; review Poret report; teleconference with counsel.	5.50 675.00/hr	3,712.50
	AJK Review Choi Declaration; teleconference with CBW, T Blood, T O'Reardon.	1.75 325.00/hr	568.75
4/17/2017	CBW Review Document production.	1.00 675.00/hr	675.00
	For professional services	<u>8.25</u>	<u>\$4,956.25</u>
	Please replenish Client funds with		\$10,000.00
	Balance due		<u><u>\$14,956.25</u></u>

*5000.00 PA 6/28/17
 -#6094*

Blood, Hurst & O'Reardon LLP

6197

ECONOMICS AND TECHNOLOGY, INC.

8/9/17

5480 · PROFESSIONAL SERVICES	INV NO. 201706697
5480 · PROFESSIONAL SERVICES	INV NO. 201706728
5480 · PROFESSIONAL SERVICES	INV NO. 201708750

27,806.25
1,787.50
14,985.55

UNION BANK - GENE JOINT JUICE

44,579.30

REORDER (760)804-808R NANCY WILSON UCS#799418



ECONOMICS AND TECHNOLOGY, INC.

ONE WASHINGTON MALL, 15th Floor
 BOSTON, MASSACHUSETTS 02108 617-598-2200

May 31, 2017

Blood Hurst & O'Reardon, LLP
 Attn: Timothy Blood
 701 B Street, Suite 1700
 San Diego, CA 92101

In Reference To: Joint Juice Litigation
 Invoice # 201706697
 Account # 2216.42831

Week of	Professional Services	Hrs/Rate	Amount
5/1/2017	CBW Review Document production; discussion with AJK.	1.25 675.00/hr	843.75
	AJK Review Choi production materials; conduct regression analysis.	7.50 325.00/hr	2,437.50
5/8/2017	CBW Review Poret report and materials; teleconference with T O'Reardon; draft Expert Declaration.	3.25 675.00/hr	2,193.75
5/15/2017	CBW Review Keegan, Maronick reports; analyze Poret data; teleconference with T O'Reardon; draft Expert Declaration.	17.25 675.00/hr	11,643.75
	AJK Assist with preparation of CBW Reply Declaration.	23.75 325.00/hr	7,718.75
	LLS Assist with preparation of CBW Declaration.	2.00 675.00/hr	1,350.00
5/22/2017	CBW Review Choi, Poret reply reports; communications with counsel.	1.00 675.00/hr	675.00
5/29/2017	CBW Teleconference with T O'Reardon; produce documents.	0.50 675.00/hr	337.50

Professional time is reported on a weekly basis, dates shown represent week beginning dates

Blood Hurst & O'Reardon, LLP

Page 2

	<u>Hrs/Rate</u>	<u>Amount</u>
5/29/2017 AJK Assist with preparation of Weir document production.	2.00 325.00/hr	650.00
For professional services	<u>58.50</u>	<u>\$27,850.00</u>
Previous balance		\$4,956.25
Please replenish Client funds with		\$10,000.00
Balance due		<u><u>\$42,806.25</u></u>

<u>Current</u>	<u>30 Days</u>	<u>60 Days</u>	<u>90 Days</u>	<u>120+ Days</u>
\$27,850.00	\$4,956.25	\$0.00	\$0.00	\$0.00



ECONOMICS AND TECHNOLOGY, INC.

ONE WASHINGTON MALL, 15th Floor
 BOSTON, MASSACHUSETTS 02108 617-598-2200

June 30, 2017

Blood Hurst & O'Reardon, LLP
 Attn: Timothy Blood
 701 B Street, Suite 1700
 San Diego, CA 92101

In Reference To: Joint Juice Litigation
 Invoice # 201706728
 Account # 2216.42831

Week of Professional Services

	<u>Hrs/Rate</u>	<u>Amount</u>
6/12/2017 AJK Assist with preparation for Choi deposition.	5.50 325.00/hr	1,787.50
For professional services	<u>5.50</u>	<u>\$1,787.50</u>
Previous balance		\$32,806.25
Please replenish Client funds with		\$10,000.00
Balance due		<u><u>\$44,593.75</u></u>

<u>Current</u>	<u>30 Days</u>	<u>60 Days</u>	<u>90 Days</u>	<u>120+ Days</u>
\$1,787.50	\$27,850.00	\$4,956.25	\$0.00	\$0.00

Professional time is reported on a weekly basis, dates shown represent week beginning dates



ECONOMICS AND TECHNOLOGY, INC.

ONE WASHINGTON MALL, 15th Floor
 BOSTON, MASSACHUSETTS 02108 617-598-2200

July 31, 2017

Blood Hurst & O'Reardon, LLP
 Attn: Timothy Blood
 701 B Street, Suite 1700
 San Diego, CA 92101

In Reference To: Joint Juice Litigation
 Invoice # 201706750
 Account # 2216.42831

Week of Professional Services

		<u>Hrs/Rate</u>	<u>Amount</u>
7/3/2017	CBW Teleconference with T O'Reardon; produce documents; assist with preparation for Choi deposition.	1.50 675.00/hr	1,012.50
7/10/2017	CBW Teleconference with T O'Reardon; assist with preparation for Poret deposition.	2.75 675.00/hr	1,856.25
7/17/2017	CBW Prepare for and testify at deposition.	15.50 675.00/hr	10,462.50
	For professional services	<u>19.75</u>	<u>\$13,331.25</u>
	Additional Charges:		
		<u>Expense</u>	
7/21/2017	CBW NYC 7/19-20, Deposition	1,654.30	1,654.30
	Total additional charges		<u>\$1,654.30</u>
	Total amount of this bill		<u>\$14,985.55</u>
	Previous balance		\$34,593.75

Professional time is reported on a weekly basis. dates shown represent week beginning dates

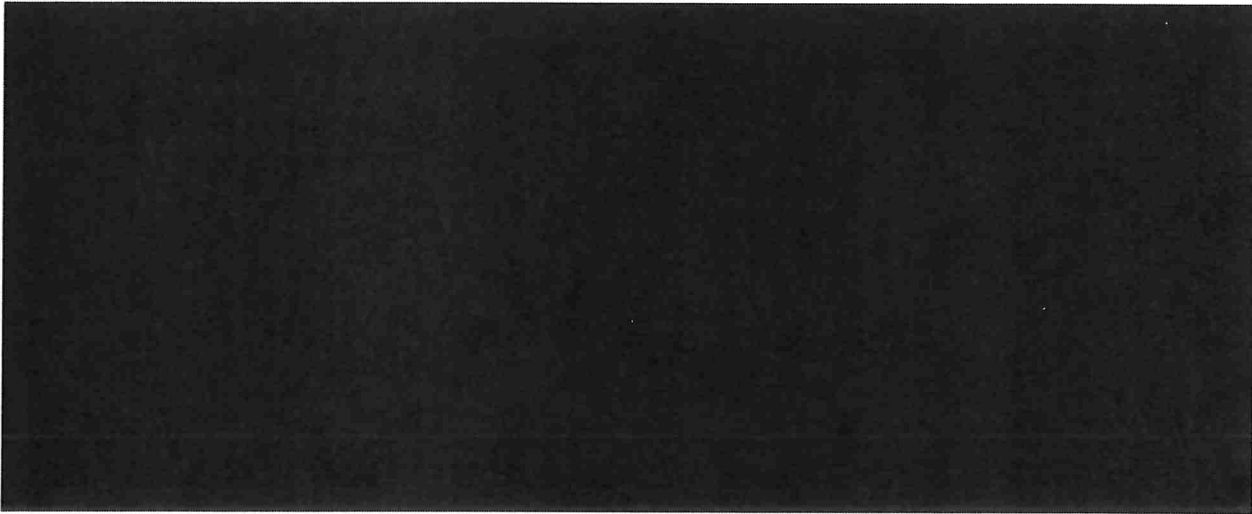
Blood Hurst & O'Reardon, LLP

Page 2

	<u>Amount</u>
Accounts receivable transactions	
7/10/2017 Payment - Thank You. Check No. 6094	(\$5,000.00)
Total payments and adjustments	(\$5,000.00)
Please replenish Client funds with	\$10,000.00
Balance due	<u>\$54,579.30</u>

<u>Current</u>	<u>30 Days</u>	<u>60 Days</u>	<u>90 Days</u>	<u>120+ Days</u>
\$14,985.55	\$1,787.50	\$27,806.25	\$0.00	\$0.00

Joint Juice invoice



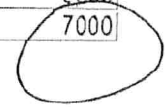
From: McAlindon, Timothy [mailto:tmcalindon@tuftsmedicalcenter.org]
 Sent: Friday, May 12, 2017 8:07 AM
 To: Paula Brown <pbrown@bholaw.com>
 Cc: 'tmcalindon@gmail.com' (tmcalindon@gmail.com) <tmcalindon@gmail.com>
 Subject: RE: invoice

*PA 6/14/17
 #6077*

Hi Paula

Here is an update on the hours worked since the last invoice
 14 hours; total = \$7000

20-Mar	830	930	1	500	500
21-Mar				0	500
22-Mar	1530	1630	1	500	1000
25-Apr			1	500	1500
26-Apr			3	1500	3000
2-May	1630	1730	1	500	3500
8-May	1430	1730	3	1500	5000
9-May	1530	1630	1	500	5500
12-May	1630	1930	3	1500	7000



Thank you

Tim

Tim McAlindon
 Rheumatology

FW: invoice

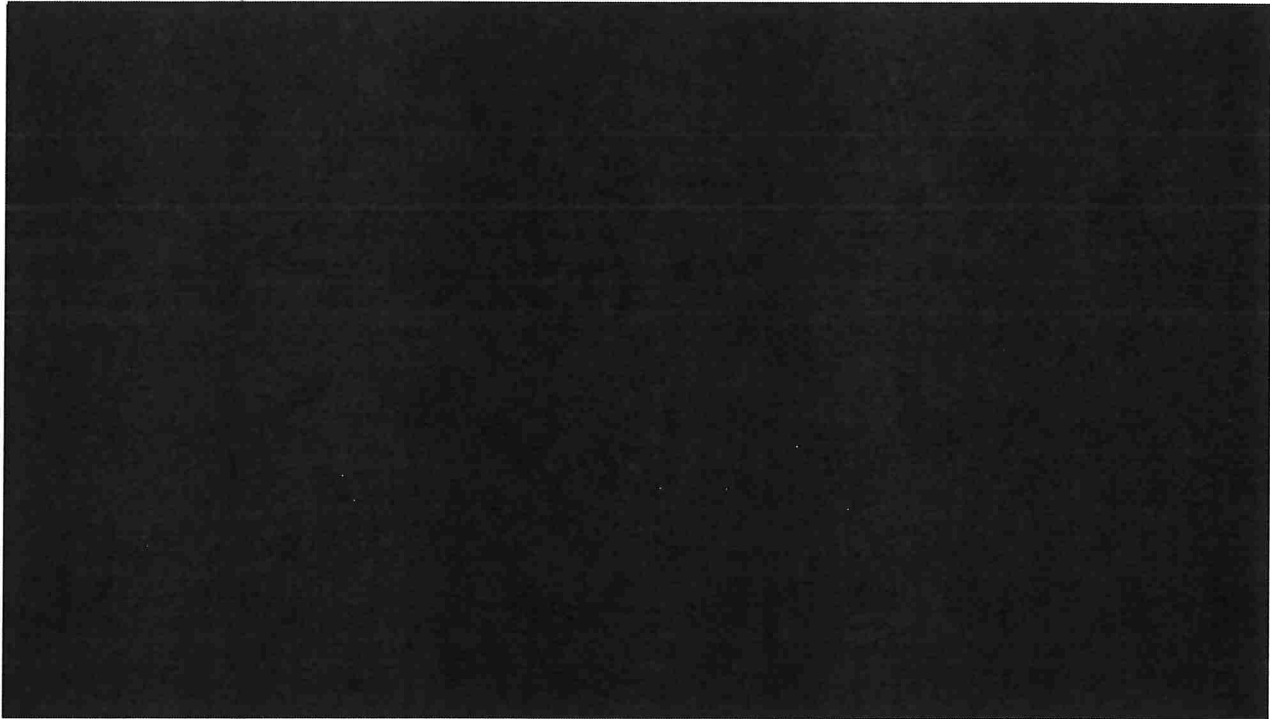
Tommy O'Reardon <TOReardon@bholaw.com>

Thu 7/6/2017 11:22 AM

To: Janet Harrison <msdalmation@msn.com>;

*PA 7/6/17
#6/15*

Can you please pay Dr. McAlindon for his \$3k invoice below? And also Colin Weir for the \$5k invoice from April.



From: McAlindon, Timothy
Sent: Friday, June 02, 2017 1:02 PM
To: 'Paula Brown'
Cc: "tmcAlindon@gmail.com" (tmcAlindon@gmail.com); 'Tommy O'Reardon'
Subject: RE: invoice

Hi Paula

Since the May 12th invoice I logged an additional 6 hours (below), however, I haven't received that one yet so I would like to check that I didn't miss it.

Thanks

Tim

14-May	1530	1730	2		1000	1000
--------	------	------	---	--	------	------

Mail - MSDALMATION@msn.com

Page 2 of 4

16-May	1430	1630	2		1000	2000
17-May	1000	1100	1		500	2500
19-May	1100	1200	1		500	3000

Tim

Tim McAlindon
Rheumatology

From: McAlindon, Timothy
Sent: Friday, May 12, 2017 11:07 AM
To: 'Paula Brown'
Cc: 'tmcalindon@gmail.com' (tmcalindon@gmail.com)
Subject: RE: invoice

Hi Paula

Here is an update on the hours worked since the last invoice
14 hours; total = \$7000

20-Mar	830	930	1		500	500
21-Mar					0	500
22-Mar	1530	1630	1		500	1000
25-Apr			1		500	1500
26-Apr			3		1500	3000
2-May	1630	1730	1		500	3500
8-May	1430	1730	3		1500	5000
9-May	1530	1630	1		500	5500
12-May	1630	1930	3		1500	7000

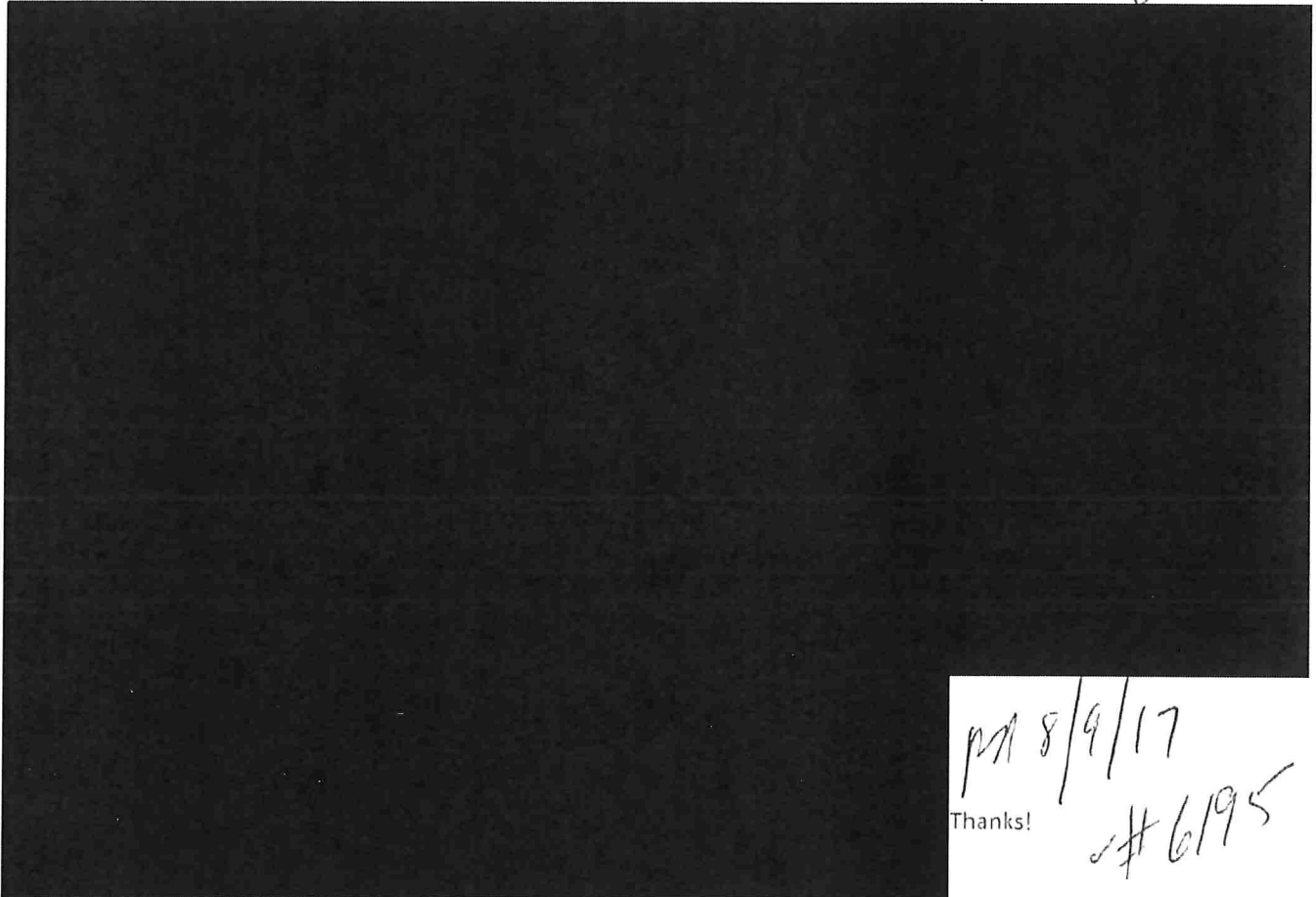
Thank you

Tim

Tim McAlindon
Rheumatology

RE: invoice

McAlindon



PA 8/9/17
Thanks!
#6195

From: McAlindon, Timothy [mailto:tmcalindon@tuftsmedicalcenter.org]
Sent: Monday, July 17, 2017 9:52 AM
To: Tommy O'Reardon <TOReardon@bholaw.com>; Paula Brown <pbrown@bholaw.com>
Cc: "tmcalindon@gmail.com" (tmcalindon@gmail.com) <tmcalindon@gmail.com>
Subject: RE: invoice

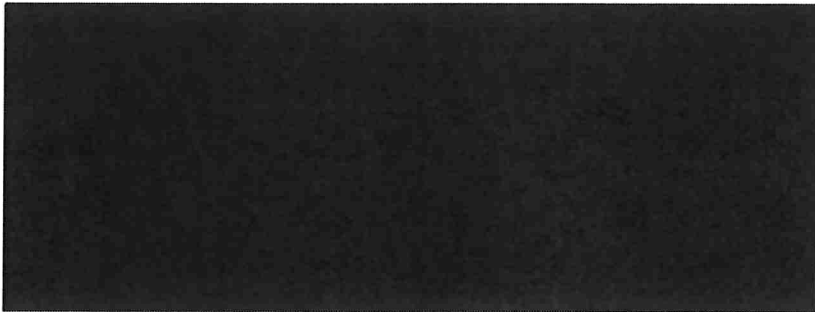
Hi Paula, Tommy

Here is the log of hours since my last invoice.

Thank you

DATE	START	FINISH	HOURS	total	cumulative	
13-Jul	1700	2000	3	1500	1500	meeting with Tim Blood and Tommy O'Reardon
14-Jul	700	900	2	1000	2500	reviewing deposition
14-Jul	930	1730	8	4000	<u>6500</u>	DEPOSITION

RE: invoice



re: Joint Juice

*PA 11/1/17
#6355*

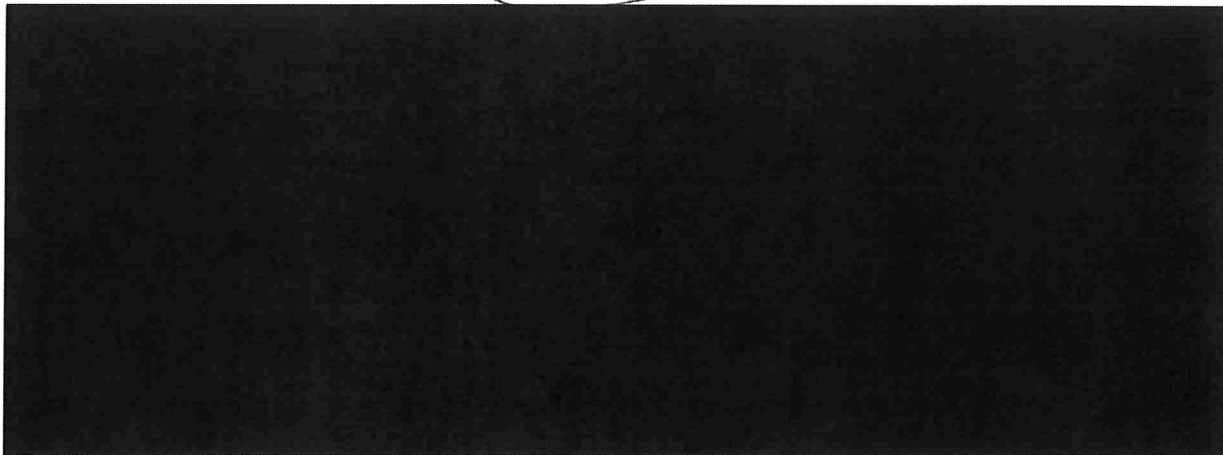
From: Tommy O'Reardon
Sent: Monday, October 02, 2017 10:39 AM
To: Janet Harrison <msdalmation@msn.com>
Cc: Paula Brown <pbrown@bholaw.com>
Subject: FW: invoice

Janet - Please cut a check for \$3,000 to Dr. McAlindon in Joint Juice. Thanks.

From: Tim McAlindon [<mailto:tmcalindon@gmail.com>]
Sent: Monday, October 02, 2017 10:17 AM
To: Paula Brown <pbrown@bholaw.com>
Cc: Tommy O'Reardon <TORreardon@bholaw.com>
Subject: Re: invoice

Hi Paula
Looking through my log and noticed some unbilled hours (below) - could I submit these for payment?
Thank you
Tim McAlindon

17-Aug	1000	1430	4.5	2250	2250
1-Sep	1430	1500	1.5	750	3000



19-May	1100	1200	1	500	3000
--------	------	------	---	-----	------

Tim

Tim McAlindon
Rheumatology

From: McAlindon, Timothy
Sent: Friday, May 12, 2017 11:07 AM
To: 'Paula Brown'
Cc: 'tmcalindon@gmail.com' (tmcalindon@gmail.com)
Subject: RE: invoice

Hi Paula

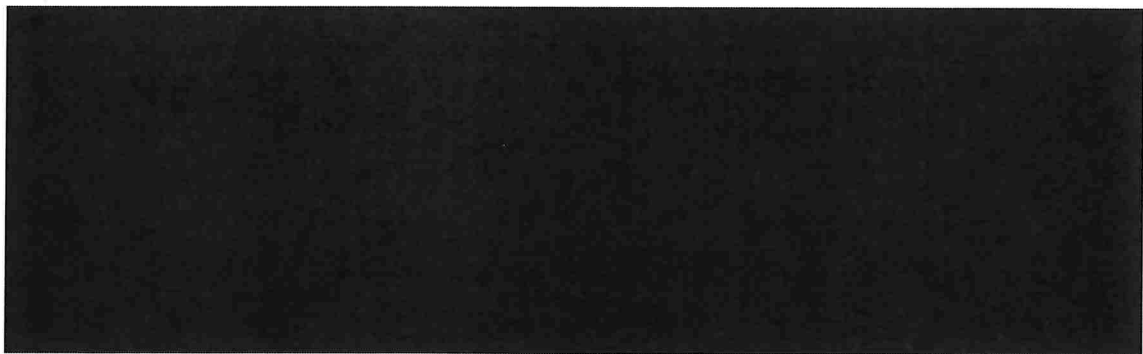
Here is an update on the hours worked since the last invoice
14 hours; total = \$7000

<image001.png>

Thank you

Tim

Tim McAlindon
Rheumatology



From: McAlindon, Timothy [mailto:tmcalindon@tuftsmedicalcenter.org]
Sent: Friday, February 17, 2017 10:43 AM
To: Paula Brown <pbrown@bholaw.com>
Cc: 'tmcalindon@gmail.com' (tmcalindon@gmail.com)
 <tmcalindon@gmail.com>
Subject: invoice

Hi Paula:

Here is my log of time spent so far on the Mullins v. Premier Nutrition project:

DATE	START	FINISH	HOURS
JAN 6 2017	900	1100	2
JAN 9 2017	900	1000	1
JAN 27 2017	1400	1600	2
30-Jan	1500	1400	1
1-Feb	1500	1600	1
2-Feb	1400	1700	3
3-Feb	1400	1600	2
4-Feb	1030	1130	1
4-Feb	1430	1630	2
5-Feb	1030	1130	1
5-Feb	1530	1630	1
13-Feb	1700	1900	2
13-Feb	2100	2300	2
15-Feb	1730	1830	1
16-Feb	1530	1830	3

Total: 25 hours at \$500/hour = \$12,500

Not sure if I gave you my relevant information

Address:

15 Hillsdale Rd
Arlington MA 02476

Is there any other info that you need?

Thanks,

Tim

Tim McAlindon MD MPH

Chief, Division of Rheumatology

Natalie V. Zucker and Milton O. Zucker Chair in Rheumatology

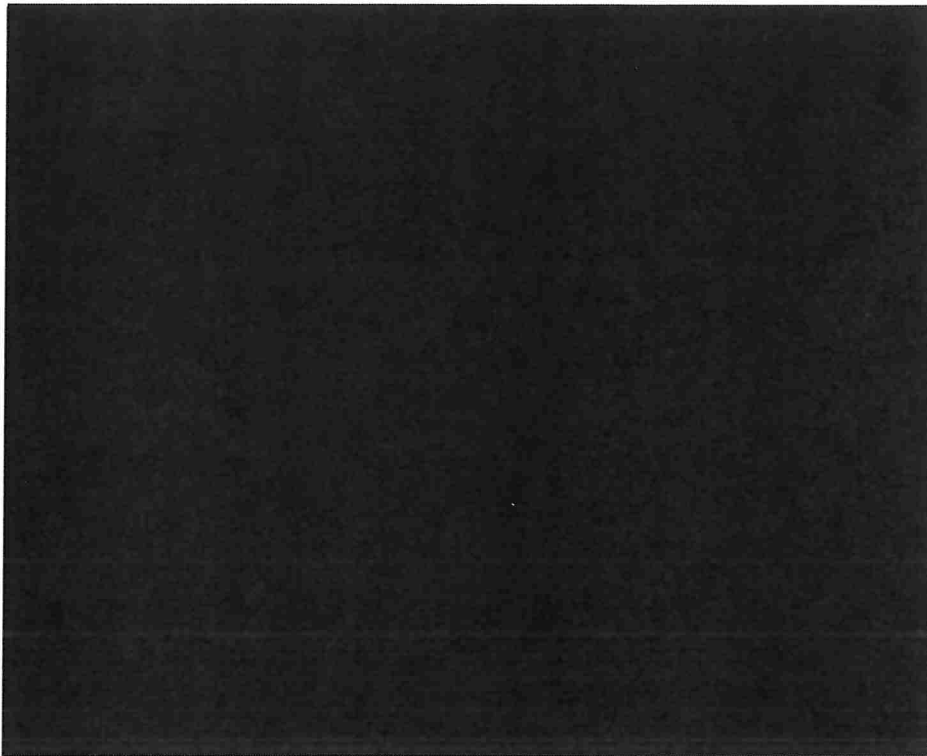
Tufts Medical Center, Box 406

800 Washington Street

Boston, MA 02111

617-636-5645

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*pd 11/29/17
#6416*

Here is a report of the hours I spent on this so far:

DATE	START	FINISH	HOURS	total	cumulative
8-Nov	1530	1730	2	1000	1000
10-Nov	1530	1700	1.5	750	1750
13-Nov	1100	1200	1	500	2250
15-Nov	1030	1130	1	500	2750
17-Nov	1400	1530	1.5	750	3500
20-Nov	1100	1200	1	500	4000
22-Nov	1000	1130	1.5	750	4750
27-Nov	1400	1600	2	1000	5750

Does it seem reasonable?

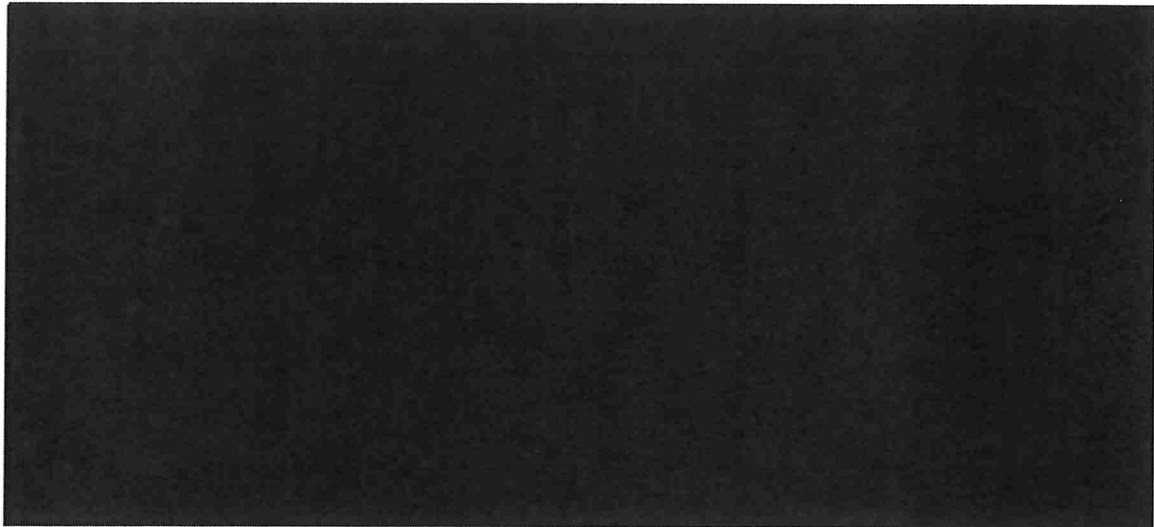
Thanks

Tim

Tim McAlindon
Rheumatology

From: Tommy O'Reardon [mailto:TORreardon@bholaw.com]

Sent: Friday, November 03, 2017 8:33 PM



Hi Tommy

Here is a log of the hours expended in the Joint Juice work during the period Aug 8th - 28th

15-Aug	1000	1100	1	500	joint juice
18-Aug	900	1100	2	1000	joint juice
26-Aug	1400	1430	0.5	250	telecon joint juice
28-Aug	745	815	0.5	250	declaration checking signing joint juice

Total = 4 hours

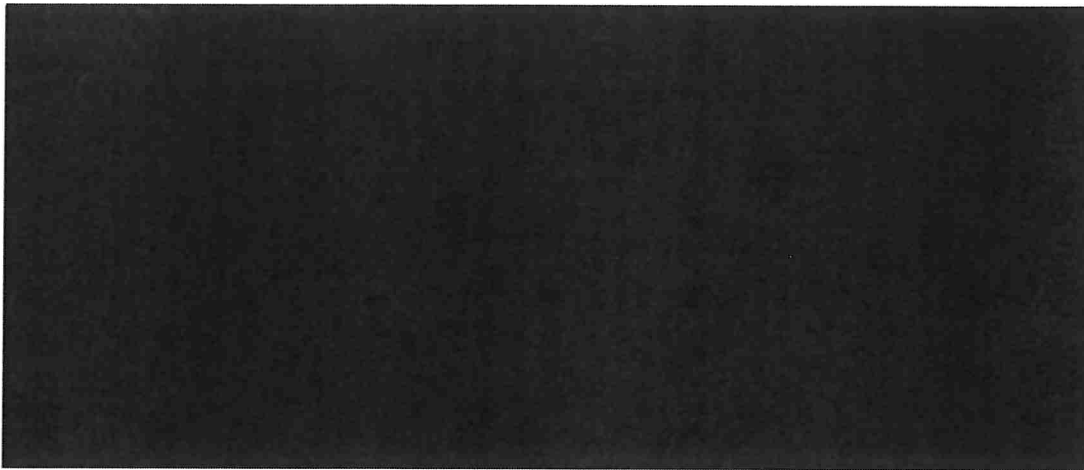
Thank you

Tim

Sent from [Mail](#) for Windows 10

~~4.0~~
~~x 500.00~~
~~2000.~~

pm 9/18/19
 ✓ #7742



Hi Tommy

This is a log of my hours preparing the report for Joint Juice. Seem reasonable?

Let me know how I should format this.

Date	hours	tot	cum total
18-Jan-22	3	1500	1500
21-Jan-22	2	1000	2500
22-Jan-22	6	3000	5500
23-Jan-22	3	1500	7000
24-Jan-22	1	500	7500
TOTAL		\$ 7500	✓

*pd 2/1/22
#9024*

Best

Tim

Timothy McAlindon MD MPH

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JMDSTAT CONSULTING INC

February 14, 2022

BLOOD HURST & O'REARDON, LLP
 TIMOTHY G. BLOOD (149343)
 THOMAS J. O'REARDON II (247952)
 501 West Broadway, Suite 1490
 San Diego, CA 92101

RE: Invoice Reference # 1361 invoice in the *Joint Juice* litigation.

Below is my invoice for my expert report (consumer survey) filed on January 24, 2022. The invoice is for all my labor and expenses through end of January 2022.

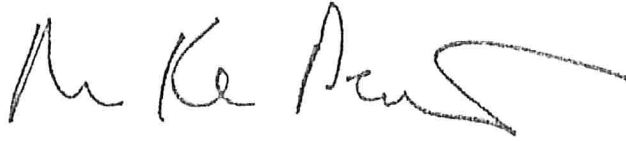
DATE	HOURS WORKED	NOTES
5/27/2021	1.25	Telconference with Counsel; Preparation
11/7/2021	2	Planning
11/10/2021	1	Telconference with Counsel; Preparation
11/21/2021	0.75	Project management
W/E 12/11/2021	2	CONSUMER SURVEY
W/E 12/18/2021	2.5	CONSUMER SURVEY
W/E 12/25/2021	16	CONSUMER SURVEY
W/E 1/1/2022	23	CONSUMER SURVEY
1/2/2022	2.5	CONSUMER SURVEY
1/5/2022	2	CONSUMER SURVEY
1/6/2022	3	CONSUMER SURVEY
1/11/2022	3	CONSUMER SURVEY
1/12/2022	2	CONSUMER SURVEY
1/13/2022	3	CONSUMER SURVEY
1/21/2022	3	CONSUMER SURVEY
1/22/2022	8	EXPERT REPORT
1/23/2022	9	EXPERT REPORT
1/24/2022	5	EXPERT REPORT
1/25/2022	1	Project management
1/26/2022	1	Rebuttal Decl work
Total Hours	91	
Hourly Rate	\$425	
Labor Costs	\$ 38,675.00	
Vendor Costs	\$19,554	
GRAND TOTAL	\$ 58,229.00	

Total Invoice Amount to be paid to JMDSTAT Consulting Inc.: \$ 58,229.00

pd 3/1/22 # 9065
(2) = 69,916.50

The invoices for my vendor expenses are available upon request. *My mailing address for your records: JMDSTAT Consulting Inc. 274 Redwood Shores Parkway #529 Redwood City, CA 94065.*

Best Regards,

A handwritten signature in black ink, appearing to read "Mike Dennis". The signature is fluid and cursive, with a long horizontal stroke at the end.

J. Michael Dennis, Ph.D.

JMDSTAT CONSULTING INC

February 15, 2022

BLOOD HURST & O'REARDON, LLP
 TIMOTHY G. BLOOD (149343)
 THOMAS J. O'REARDON II (247952)
 501 West Broadway, Suite 1490
 San Diego, CA 92101

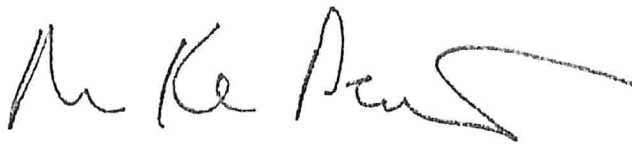
RE: Invoice Reference # 1362 invoice in the *Joint Juice* litigation.

Below is my invoice for my rebuttal expert report filed on February 14, 2022.

DATE	HOURS WORKED	NOTES
Week of Jan 23, 2022	2.00	Rebuttal Decl work
Week of Jan 30, 2022	1.50	Rebuttal Decl work
Week of Feb 6, 2022	9.25	Rebuttal Decl work
2/13/2022	12.50	Rebuttal Decl work
2/14/2022	2.25	Rebuttal Decl work
Total Hours	27.5	
Hourly Rate	\$425	
Labor Costs	\$ 11,687.50	
Vendor Costs		
GRAND TOTAL	\$ 11,687.50	

Total Invoice Amount to be paid to JMDSTAT Consulting Inc.: \$ 11,687.50
 The invoices for my vendor expenses are available upon request. *My mailing address for your records: JMDSTAT Consulting Inc. 274 Redwood Shores Parkway #529 Redwood City, CA 94065.*

Best Regards,



J. Michael Dennis, Ph.D.

Janet Harrison

From: Derek Rucker <d-rucker@kellogg.northwestern.edu>
Sent: Thursday, February 3, 2022 4:44 PM
To: Tommy O'Reardon
Subject: Rucker December/January hours for Expert Work on Joint Juice Litigation

Hi Tommy,

Here is my invoice for December and January:

December 5.5 hours for a total of \$4,950 dollars.

January 46.5 hours for a total of \$41,850 dollars.

Best,

Derek

pd 3/1/22
A9060

② = 53,550.00



Home: 2210 Schiller Ave.
Wilmette, IL 60091

Janet Harrison

From: Derek Rucker <d-rucker@kellogg.northwestern.edu>
Sent: Monday, February 28, 2022 6:46 PM
To: Tommy O'Reardon
Subject: February Invoice

Hi Tommy,

Here is my invoice for February:

7.5 hours for a total of 6,750 dollars.

Best,

Derek

Derek D. Rucker
Sandy & Morton Goldman Professor of Entrepreneurial Studies in Marketing

J. L. Kellogg School of Management at Northwestern University
2211 Campus Drive | Room 5353 | Evanston, IL 60208
P 847.491.2714

Co-Editor, [Consumer Psychology Review](#)

Janet Harrison

From: McAlindon, Timothy <tmcalindon@tuftsmedicalcenter.org>
Sent: Wednesday, February 16, 2022 6:46 AM
To: Tommy O'Reardon
Cc: McAlindon, Timothy
Subject: Hours log

Hi Tommy

Here is the log of my hours for the Joint Juice report since the last invoice.

4-Feb	1	500	500
5-Feb	8	4000	4500
6-Feb	2	1000	5500
7-Feb	4	2000	7500
10-Feb	4	2000	9500
11-Feb	1	500	10000
12-Feb	3	1500	11500
13-Feb	6	3000	14500
14-Feb	3.5	1750	16250

Let me know if it looks OK.

Best

Tim

*pd 3/1/22
#9061*

Timothy McAlindon
617-636-5645 direct phone
617-636-1058 conference line
617-636-5645 Admin Assistant

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JMDSTAT CONSULTING INC

March 11, 2022

BLOOD HURST & O'REARDON, LLP
 TIMOTHY G. BLOOD (149343)
 THOMAS J. O'REARDON II (247952)
 501 West Broadway, Suite 1490
 San Diego, CA 92101

RE: Invoice Reference # 1363 invoice in the *Joint Juice* litigation.

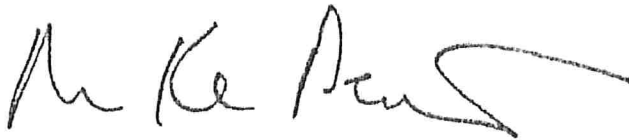
Below is my invoice for the work I did leading up to my March 10, 2022 deposition and including my labor for the deposition itself.

DATE	HOURS WORKED	NOTES
2/28/2022	1	Defendants' expert reports
3/3/2022	2.00	Defendants' expert reports
3/4/2022	1.00	Defendants' expert reports
3/6/2022	2.00	Defendants' expert reports
3/9/2022	2.00	Depo prep
3/10/2022	2.00	Depo prep
Total Hours	10	
Hourly Rate	\$425	
Labor Costs	\$ 4,250.00	
3/10/2022	4.50	Deposition labor hours (9:00 am to 2:00pm, less 30 minute break)
Hourly Rate for Depo Testimony	\$600	
Labor Costs	\$ 2,700.00	
GRAND TOTAL	\$ 6,950.00	

Total Invoice Amount to be paid to JMDSTAT Consulting Inc.: \$ 6,950.00

The invoices for my vendor expenses are available upon request. *My mailing address for your records: JMDSTAT Consulting Inc. 274 Redwood Shores Parkway #529 Redwood City, CA 94065.*

Best Regards,



J. Michael Dennis, Ph.D.

pd 3/14/22
 # 9077



ECONOMICS AND TECHNOLOGY, INC.

ONE WASHINGTON MALL, 7th Floor
 BOSTON, MASSACHUSETTS 02108 617-598-2200

March 31, 2022

Blood Hurst & O'Reardon, LLP
 Attn: Timothy Blood
 501 West Broadway - Suite 1490
 San Diego, CA 92101

In Reference To: Fishon v. Premier Nutrition
 Invoice # 202208147
 Account # 2216.44536

Week of Professional Services

	<u>Hrs/Rate</u>	<u>Amount</u>
3/1/2022 CBW Communications with counsel; prepare document production.	1.00 775.00/hr	775.00
3/7/2022 CBW Communications with counsel; prepare for and give deposition testimony.	6.25 775.00/hr	4,843.75
3/21/2022 CBW Communications with counsel; review deposition transcript, prepare errata.	0.50 775.00/hr	387.50
3/28/2022 CBW Review deposition transcript, prepare errata.	1.50 775.00/hr	1,162.50

For professional services

9.25 \$7,168.75

Previous balance

\$1,356.25

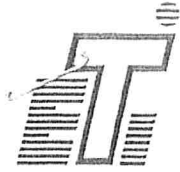
Balance due

\$8,525.00

pd 4/26/22
9119
(2) = 8,525.00

<u>Current</u>	<u>30 Days</u>	<u>60 Days</u>	<u>90 Days</u>	<u>120+ Days</u>
\$7,168.75	\$1,356.25	\$0.00	\$0.00	\$0.00

Professional time is reported on a weekly basis, dates shown represent week beginning dates



ECONOMICS AND TECHNOLOGY, INC.

ONE WASHINGTON MALL, 7th Floor
 BOSTON, MASSACHUSETTS 02108 617-598-2200

February 28, 2022

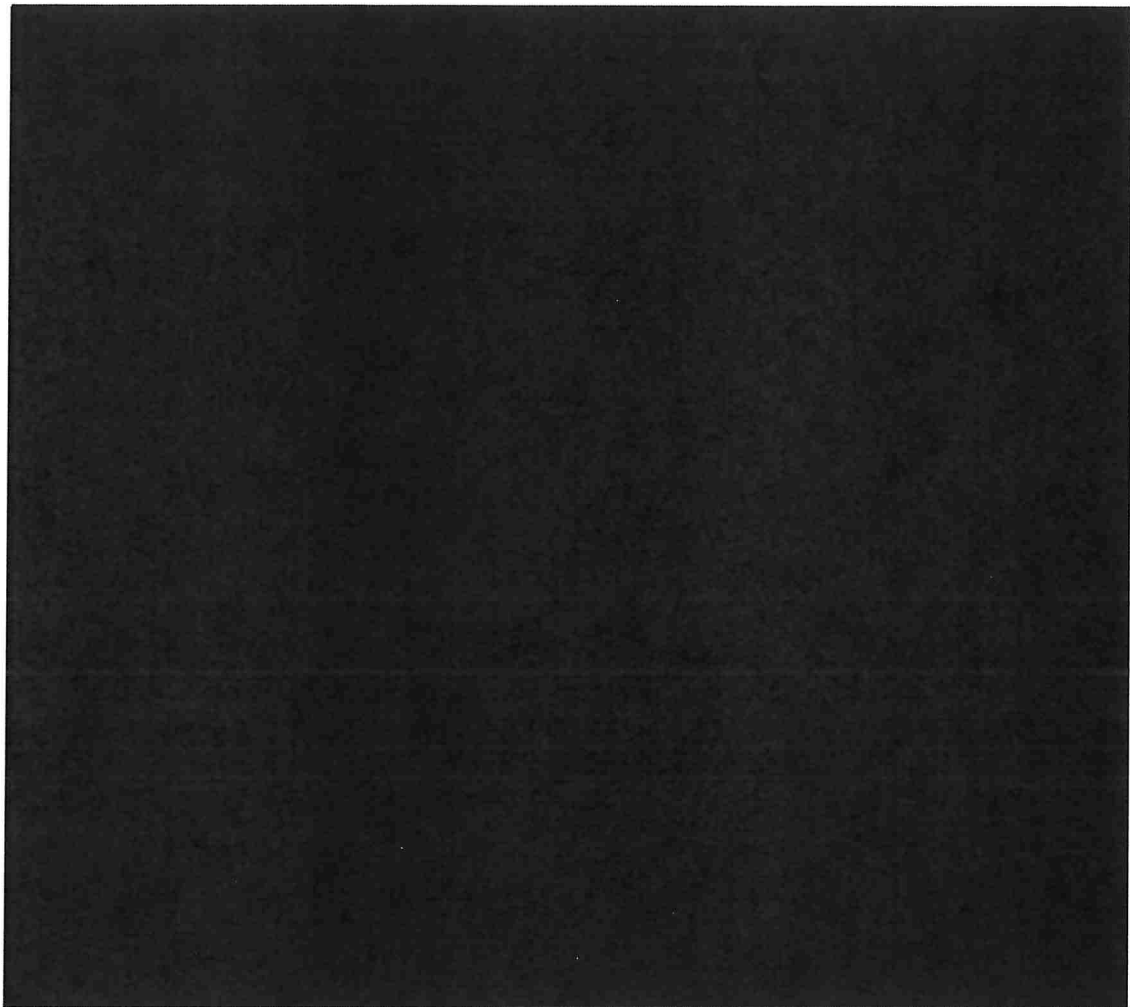
Blood Hurst & O'Reardon, LLP
 Attn: Timothy Blood
 501 West Broadway - Suite 1490
 San Diego, CA 92101

In Reference To: Fishon v. Premier Nutrition
 Invoice # 202208123
 Account # 2216.44536

Week of Professional Services

	<u>Hrs/Rate</u>	<u>Amount</u>
2/14/2022 CBW Communications with counsel; analyze Choi report.	1.75 775.00/hr	1,356.25
For professional services	<u>1.75</u>	<u>\$1,356.25</u>
Previous balance		\$11,431.25
Accounts receivable transactions		
3/7/2022 Payment - Thank You. Check No. 9062		(\$11,431.25)
Total payments and adjustments		<u>(\$11,431.25)</u>
Balance due		<u>\$1,356.25</u>

RECEIVED APR 19 2022



On Apr 7, 2022, at 11:30 AM, Derek Rucker <d-rucker@kellogg.northwestern.edu> wrote:

Hi Tommy,

Here is my invoice for March:

17.75 hours for a total of 15,975 dollars.

Best,

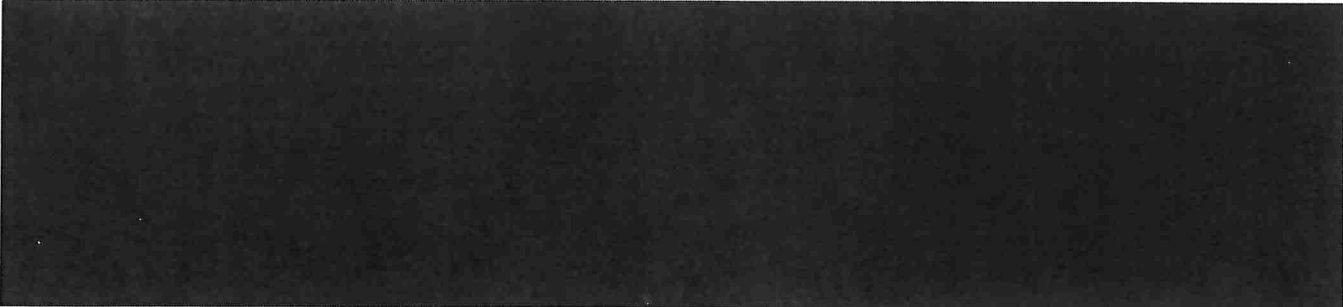
Derek

pd 5/10/22
#9139

Derek D. Rucker
Sandy & Morton Goldman Professor of Entrepreneurial Studies in Marketing

J. L. Kellogg School of Management at Northwestern University
2211 Campus Drive | Room 5353 | Evanston, IL 60208
P 847.491.2714

Co-Editor, [Consumer Psychology Review](#)



From: McAlindon, Timothy <tmcalindon@tuftsmedicalcenter.org>
Sent: Saturday, March 19, 2022 10:15 AM
To: Tommy O'Reardon <TOReardon@bholaw.com>
Cc: McAlindon, Timothy <tmcalindon@tuftsmedicalcenter.org>
Subject: log of hours regarding prep time for the JJ deposition

Hi Tommy

Here is my log of hours regarding prep time for the JJ deposition:

3-Mar	1	500	500
7-Mar	7	3500	4000

Thanks

4000.

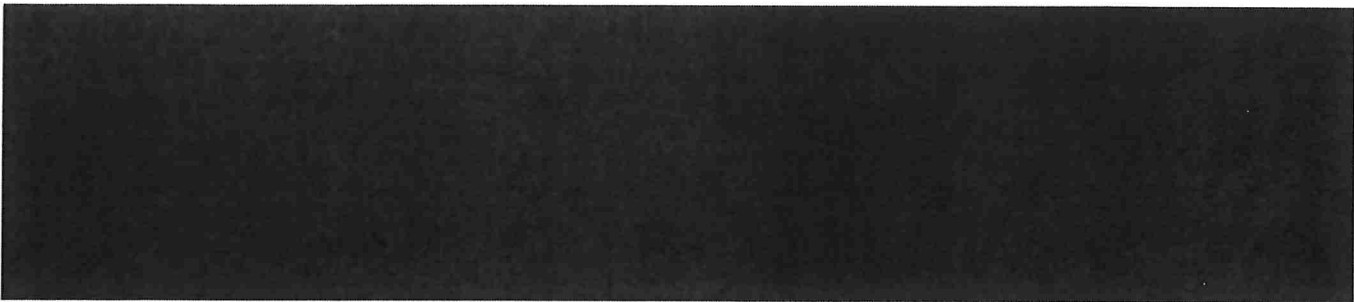
Tim

Timothy McAlindon MD MPH
Chief, Division of Rheumatology, Allergy & Immunology
Natalie V. Zucker and Milton O. Zucker Chair in Rheumatology
Tufts Medical Center, Box 406
800 Washington Street
Boston, MA 02111
617-636-5645 direct phone
617-636-1058 conference line
617-636-5645 Admin Assistant

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*ml 4/26/22
#9124
② = 8250.00*



From: McAlindon, Timothy <tmcalindon@tuftsmedicalcenter.org>
Sent: Saturday, March 19, 2022 10:14 AM
To: Tommy O'Reardon <TOReardon@bholaw.com>
Cc: McAlindon, Timothy <tmcalindon@tuftsmedicalcenter.org>
Subject: Invoice - Joint Juice deposition

Hi Tommy

I spent 8.5 hours in the deposition as below:

8-Mar	8.5	4250	deposition
-------	-----	------	------------

Total: \$4250

Thank you

Timothy McAlindon MD MPH
Chief, Division of Rheumatology, Allergy & Immunology
Natalie V. Zucker and Milton O. Zucker Chair in Rheumatology
Tufts Medical Center, Box 405
800 Washington Street
Boston, MA 02111
617-636-5645 direct phone
617-636-1058 conference line
617-636-5645 Admin Assistant

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FARSHID GUILAK, PHD

BLOOD HURST & O'REARDON, LLP
 TIMOTHY G. BLOOD
 THOMAS J. O'REARDON II
 501 West Broadway, Suite 1490 San Diego, CA 92101

RE: Joint Juice Case

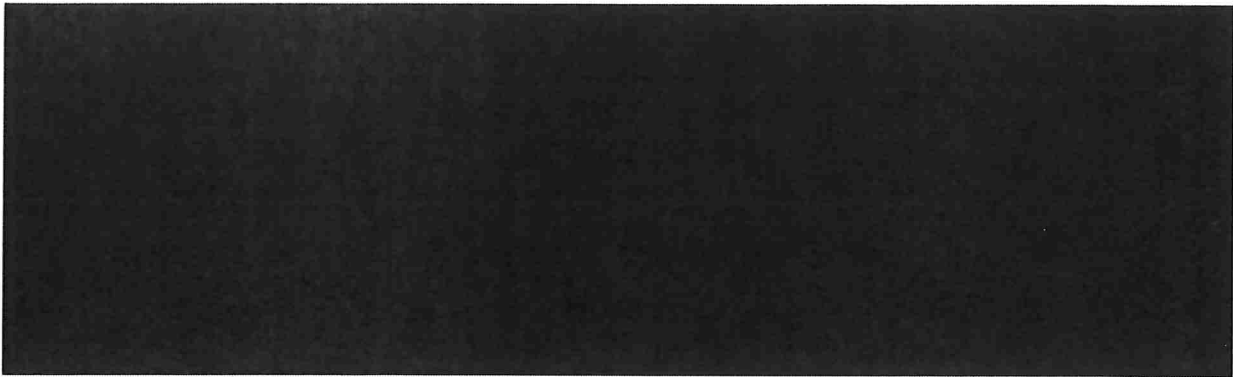
INVOICE for consulting services

Date	Description	Time (hrs)	Expense (\$500/hr)
5/26/21	Telephone discussion with Mr. O'Reardon	0.5	\$250
12/21/21	Telephone discussion with Mr. O'Reardon	0.5	\$250
1/7/22	Telephone discussion with Mr. O'Reardon	0.5	\$250
1/18/22	Document review	1	\$500
1/23/22	Document review	0.5	\$250
12/26/19	Document review	0.5	\$250
2/3/22	Document preparation	3.5	\$1,750
2/13/22	Document preparation	6	\$3,000
2/13/22	Telephone discussion with Mr. O'Reardon	0.4	\$200
2/14/22	Document preparation	1	\$500
2/22/22	Document review	2	\$1,000
2/23/22	Telephone discussion with Mr. O'Reardon	1	\$500
3/5/22	Binder review and discussion	4	\$2,000
3/6/22	Deposition preparation	4	\$2,000
3/7/22	Deposition preparation	6	\$3,000
3/7/22	Telephone discussion with Mr. O'Reardon	1	\$500
3/7/22	Deposition	5	\$3,000
4/14/22	Telephone discussion with Mr. O'Reardon	0.4	\$200
4/15/22	Document and slide preparation	1	\$500
5/20/22	Emails and preparation with Mr. O'Reardon	0.5	\$250
5/30/22	Emails and preparation with Mr. O'Reardon	0.5	\$250
Subtotal			\$20,400

Please make payable to:

Farshid Guilak (EIN# 457-13-1570)
 8400 University Dr.
 Clayton MO 63105

PM 9/16/22
 #9269



From: Tim McAlindon <tmcalindon@gmail.com>
 Sent: Monday, June 13, 2022 6:18 AM
 To: Tommy O'Reardon <TOReardon@bholaw.com>; Tim McAlindon <tmcalindon@gmail.com>
 Subject: Invoice Mar 3rd - May 25th

Hi Tommy

Here is a log of my hours for that period and expenses. Let me know if there is anything else you need.

Best

Tim

3-Mar	1	500	500	
7-Mar	7	3500	4000	
8-Mar	8.5	4250	8250	deposition
13-Apr	1.5	750	750	
19-Apr	1	500	1250	
22-Apr	1	500	1750	
28-Apr	1.5	750	2500	
29-Apr	1	500	3000	
13-May	3	1500	4500	
17-May	2	1000	5500	
20-May	1	500	6000	
21-May		4000	10000	Trip to SF
22-May		4000	14000	
23-May		4000	18000	
				court
24-May		4000	22000	appearance
				court
25-May		4000	26000	appearance
TOTAL			\$26000	

pd 4/26/22 #9124

pd 6/21/22 #9189

26,000.00

Expenses

Hotel Room charge: \$1817.18

Taxi fares:

05/26/22: \$55.55

05/21/22: \$59.35

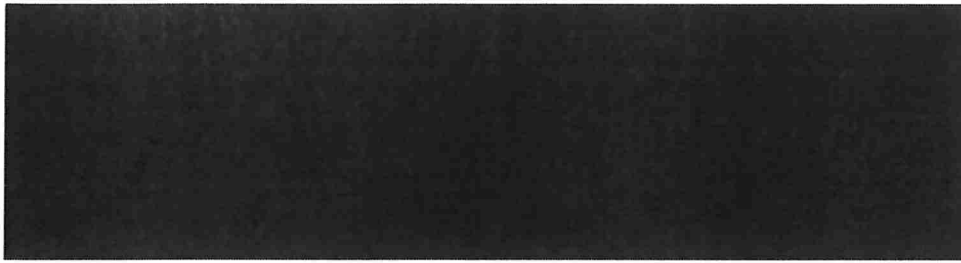
05/21/22: \$36.71

05/25/22: \$38.15

Total Expenses: \$2006.94

2006.94

28,006.94



From: Derek Rucker <d-rucker@kellogg.northwestern.edu>
Sent: Wednesday, June 1, 2022 8:47 AM
To: Tommy O'Reardon <TOReardon@bholaw.com>
Subject: Rucker May Invoice for Joint Juice

Hi Tommy,

Here is my invoice for work on the Joint Juice case in May:

30.5 hours for a total of \$27,450 dollars.

Travel costs for trial of \$1725.75

Total: \$29175.75

Best,

Derek

Derek D. Rucker
Sandy & Morton Goldman Professor of Entrepreneurial Studies in Marketing

J. L. Kellogg School of Management at Northwestern University
2211 Campus Drive | Room 5353 | Evanston, IL 60208
P 847.491.2714

Co-Editor, Consumer Psychology Review

pd 6/21/22
#9188



JMDSTAT CONSULTING INC

June 9, 2022

BLOOD HURST & O'REARDON, LLP
TIMOTHY G. BLOOD (149343)
THOMAS J. O'REARDON II (247952)
501 West Broadway, Suite 1490
San Diego, CA 92101

RE: Invoice Reference # 1370 invoice in the *Joint Juice* litigation.

Below is my invoice for my preparation for trial and for my testimony for trial day.

Trial prep at 18 hours X \$425 = \$7,650.00

Trial day at 5 hours X \$600 = \$3,000.00

Total = \$10,650.00

Total Invoice Amount to be paid to JMDSTAT Consulting Inc.: \$ 10,650.00

The invoices for my vendor expenses are available upon request. *My mailing address for your records: JMDSTAT Consulting Inc. 274 Redwood Shores Parkway #529 Redwood City, CA 94065.*

Best Regards,

J. Michael Dennis, Ph.D.

pd 6/21/22
-# 9187



ECONOMICS AND TECHNOLOGY, INC.

ONE WASHINGTON MALL, 7th Floor
 BOSTON, MASSACHUSETTS 02108 617-598-2200

May 31, 2022

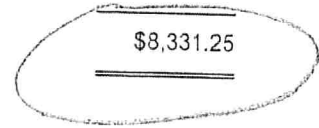
Blood Hurst & O'Reardon, LLP
 Attn: Timothy Blood
 501 West Broadway - Suite 1490
 San Diego, CA 92101

In Reference To: Fishon v. Premier Nutrition
 Invoice # 202208180
 Account # 2216.44536

Week of Professional Services

	<u>Hrs/Rate</u>	<u>Amount</u>
5/2/2022 CBW Communications with counsel; analyze data.	4.25 775.00/hr	3,293.75
5/16/2022 CBW Communications with counsel; analyze data; prepare supplement.	1.50 775.00/hr	1,162.50
5/23/2022 CBW Communications with counsel; analyze data; prepare supplement.	1.25 775.00/hr	968.75
5/30/2022 CBW Communications with counsel; prepare for and give testimony at trial.	3.75 775.00/hr	2,906.25
For professional services	<u>10.75</u>	<u>\$8,331.25</u>
Previous balance		\$8,525.00
Accounts receivable transactions		
4/30/2022 Payment - Thank You. Check No. 9119		(\$8,525.00)
Total payments and adjustments		<u>(\$8,525.00)</u>
Balance due		<u><u>\$8,331.25</u></u>

*pd 6/21/22
 # 9199*





Timothy G. Blood, Esq.
 Blood Hurst & O'Reardon, LLP
 July 14, 2022
 Page 14 of 15

Re: Montera v. Premier Nutrition Corporation
 Account No. 22-6978.01 Taxpayer I.D. No. 45-0534276

TRIAL EXHIBIT BINDER PREPARATION AND PRINTING:

1 Set of Plaintiff's Trial Exhibits for use in San Diego	
1 Set of Defendant's Trial Exhibits shipped to San Francisco	
Miscellaneous Printing: Deposition materials/video clip text reports, trial exhibits and exhibit lists, emails/instructions, etc.	
4,346 Color pages printed x \$0.65 per page	\$ 2,824.90
4,835 B&W pages printed x \$0.17 per page	821.95
8,326 3-hole paper x \$0.02 per page	166.52
575 Legal Numbered Tabs x \$0.35 per tab	201.25
15 4" D-Ring White Binders x \$20.00 per binder	300.00
14 Assembly/Labor x \$50.00 per hour	700.00
SUBTOTAL - BINDER PREPARATION/PRINTING	\$ 5,014.62

TRIAL PRESENTATION EQUIPMENT RENTAL:

Courtroom Equipment:	\$ 1,560.00
22" monitor, speaker, signal switcher, signal splitter wifi hot spot, printer/copier/scanner, cables and power supplies	
Hotel Equipment:	
22" monitor, color printer/copier/scanner, cables and power supplies	
Installation/Removal/Travel (Local Vendor):	<u>417.75</u>
Set Up on Friday, 05/20/22; removal on Tues., 06/07/22	
SUBTOTAL - EQUIPMENT RENTAL:	\$ 1,977.75

TRAVEL EXPENSES/TRANSPORTATION:

Airfare - Roundtrip Travel to/from San Diego and San Francisco	\$ 477.97
Ground Transportation - to/from the airport, hotel, court and law office	223.48
SUBTOTAL - TRAVEL/TRANSPORTATION:	\$ 701.45



Timothy G. Blood, Esq.
 Blood Hurst & O'Reardon, LLP
 July 14, 2022
 Page 15 of 15

Re: Montera v. Premier Nutrition Corporation
 Account No. 22-6978.01 Taxpayer I.D. No. 45-0534276

SUBTOTALS:

Pre-Trial Preparation Services: 03/31/22 - 05/22/22 (Debbie Burk = 94.25 hours/\$9,425.00; Shayne Davidson = 92.25 hours/\$8,321.25)	\$ 17,746.25
Trial Presentation Services: 05/23/22 - 06/08/22 (Debbie Burk = 145.00 hours/\$19,900.00; Shayne Davidson = 38.00 hours/\$3,800.00)	23,700.00
Trial Exhibit Binder Preparation And Printing:	5,014.62
Trial Presentation Equipment Rental:	1,977.75
Travel Expenses/Transportation:	<u>701.45</u>
TOTAL:	\$ 49,140.07
Less Retainer Paid - 04/19/22	- 10,000.00 ✓
Less Retainer Paid - 05/18/22	<u>- 5,000.00 ✓</u>
TOTAL BALANCE DUE ON ACCOUNT:	\$ 34,140.07

Due Date: UPON RECEIPT
 Unpaid Balances Subject to Carrying Charge of 1.5% Per Month

PLEASE REMIT TO: VideoTrack LLC
 600 West Broadway, Suite 700
 San Diego, CA 92101

PLEASE INCLUDE ACCOUNT NUMBER ON ALL PAYMENTS AND CORRESPONDENCE
THANK YOU FOR USING VIDEOTRACK!



July 5, 2022

Eugene G. Iredale, Esq.
Grace Jun, Esq.
105 West F Street, Fourth Floor
San Diego, CA. 92101

Timothy G. Blood, Esq.
701 B Street, Suite 1700
San Diego, CA. 92101

Re: Mullins v. Premier Nutrition Corp.

BILLING STATEMENT

Professional Fees:

Review case materials	
Telephone conference and correspondence with attorneys	
Meetings with attorneys and witnesses	
Review completed juror questionnaires	
In-court assistance with jury selection	
4.5 hours @ \$425	\$ 5,206.25

Expenses:

Parking	30.00
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BALANCE DUE: \$ 5,236.25

Please make checks payable to CHOPRA KOONAN LITIGATION CONSULTING

20 Quickstep Lane, San Francisco, CA 94115

415-203-6340

kjkoonan@choprakoonan.com