LEGAL ASSISTANT M A N A G E M E N T A S S OCIATIO N

## Altman Weil, Inc.

## Legal Assistant Management Association's

# 2004 Annual Compensation Survey for Legal Assistants/Paralegals and Managers 

Deadline for Submission: March 5, 2004 Publication Date: May 2004

## SECTION 1: PARTICIPANT INFORMATION

## Organization

$\qquad$

Name of Person
Completing Survey $\qquad$

Title $\qquad$

Address $\qquad$

City $\qquad$ State $\qquad$ Zip Code $\qquad$

Phone $\qquad$ Ext. $\qquad$

Fax $\qquad$

Email $\qquad$

Date Completed $\qquad$

## Please complete and return this questionnaire as promptly as possible, but no later than March 5, 2004. <br> Return completed questionnaire to:

Altman Weil ${ }^{\otimes}$ Publications, Inc.
LAMA Survey
Two Campus Boulevard, Suite 200
Newtown Square, PA 19073

Phone (888) 782-7297 • Fax (610) 359-0467 • Email: info@altmanweil.com

All information provided is strictly confidential. No specific identifying data will be revealed to any participants or to the survey sponsor. LAMA and Altman Weil thank you in advance for taking the time to compile and submit your data. We suggest you retain a copy of your completed questionnaire in case we need to contact you.

## SECTION 2: ORGANIZATION PROFILE

1. Type of Organization: (check one box only)

Law Firm
Government Agency
Corporate Law Department
Other (please specify) $\qquad$
2. Identify the scope of compensation information submitted in this questionnaire: (check one box only)
$\square$ Main Office OnlyBranch Office Only Both
3. Please provide the total number of individuals in the following positions (including main and branch office locations):

Total Number of Attorneys:


Total Number of Legal Assistants:

4. If you are a corporate law department, please answer the following:

| Revenue from last complete fiscal year: | $\$ \square \square \square, \square \square \square, 000,000$ |
| :---: | :---: |
| (Note: Financial organizations include assets under management and/or value of premiums.) |  |
| Type of Industry: (check one box only) |  |
| - Petro-Chemical Manufacturing | Wholesale/Retail Trade |
| $\square$ Pharmaceutical Manufacturing | Transportation and Warehousing |
| $\square$ Computer/Electronics Manufacturing | $\square$ Insurance |
| Other Manufacturing | $\square$ Finance |
| $\square$ Utilities | Services (Professional, Scientific, Technical) |
| $\square$ Health Care | $\square$ Education |
| Information (Telecommunications, media and data processing services) | Other Industry (please specify) |

5. Does your Organization require a Paralegal Certificate as a hiring criterion?
$\square$ Yes $\square$ No
6. Does your Organization provide additional compensation for a Paralegal Certificate or completion of a formal Paralegal Training Program?
Yes
No
7. Overall attrition rate for Legal Assistants (all categories except legal assistant clerks/project assistants) for 2003:

| $\square$ Under $2 \%$ | $11 \%$ to $25 \%$ |
| :--- | :--- |
| $\square 2 \%$ to $5 \%$ | $26 \%$ to $50 \%$ |
| $\square 6 \%$ to $10 \%$ | Over $50 \%$ |

8. For each position below, please indicate the annualized billable hour expectation for full-time professionals in 2004: (Please review position descriptions on page 9 prior to completing this question.)

| Working Manager/Supervisor | $\square, \square \square$ |
| :--- | ---: |
| Senior Legal Assistant | $\square, \square \square$ |
| Legal Assistant /Paralegal |  |
| Specialist | $\square, \square \square$ |
| Legal Assistant Clerk/Project Assistant | $\square, \square \square \square$ |

## SECTION 3: BENEFITS PROFILE

9. Indicate which of the following expenses are reimbursed as part of a benefit plan provided by your organization? (Please provide a check mark for each applicable position.)

| Reimbursed Benefits | Legal Assistant Manager | Legal <br> Assistant Coordinator/ Case Manager | Working <br> Manager/ Supervisor | $\begin{aligned} & \text { Senior } \\ & \text { Legal } \\ & \text { Assistant } \end{aligned}$ | Legal Assistant/ Paralegal | Specialist | Legal Assistant ClerkI Project Assistant |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Tuition |  |  |  |  |  |  |  |
| Professional Development |  |  |  |  |  |  |  |
| Other Educational Assistance |  |  |  |  |  |  |  |
| Professional Association Dues |  |  |  |  |  |  |  |
| Computer/Communication Equipment |  |  |  |  |  |  |  |
| Child Care |  |  |  |  |  |  |  |
| Transportation Subsidy (bus, rail, etc.) |  |  |  |  |  |  |  |
| Parking |  |  |  |  |  |  |  |
| Health Club/Wellness Programs |  |  |  |  |  |  |  |
| Overtime Transportation/Meal Allowance |  |  |  |  |  |  |  |
| Relocation Expenses for New Hires |  |  |  |  |  |  |  |
| Relocation Expenses for Transfers |  |  |  |  |  |  |  |
| Other (please specify) |  |  |  |  |  |  |  |
| Other (please specify) |  |  |  |  |  |  |  |

10. Indicate which of the following benefits are available as part of a benefit plan provided by your organization? (Please provide a check mark for each applicable position.)

| Benefits | Legal <br> Assistant <br> Manager | Legal <br> Assistant <br> Coordinator/ <br> Case <br> Manager | Working <br> Manager/ <br> Supervisor | Senior <br> Legal <br> Assistant | Legal <br> Lssistant/ <br> Paralegal | Legal <br> Assisant <br> Clerk <br> Project <br> Assistant |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Retirement Pension |  |  |  |  |  |  |  |
| 401(k) Plan |  |  |  |  |  |  |  |
| Profit Sharing (Corporate Only) |  |  |  |  |  |  |  |
| Stock Options/Investment Savings |  |  |  |  |  |  |  |
| Employee Assistance Program (EAP) |  |  |  |  |  |  |  |
| Backup Childcare |  |  |  |  |  |  |  |
| Employee Medical |  |  |  |  |  |  |  |
| Dependent Medical |  |  |  |  |  |  |  |
| Dental |  |  |  |  |  |  |  |
| Vision |  |  |  |  |  |  |  |
| Pre-Tax Health Care |  |  |  |  |  |  |  |
| Pre-Tax Dependent Care |  |  |  |  |  |  |  |
| Pre-Tax Health Club |  |  |  |  |  |  |  |
| Pre-Tax Transportation (bus, rail) |  |  |  |  |  |  |  |
| Pre-Tax Parking |  |  |  |  |  |  |  |
| Paid Transportation (bus, rail) |  |  |  |  |  |  |  |
| Paid Parking |  |  |  |  |  |  |  |
| Paid Sabbatical |  |  |  |  |  |  |  |
| Life Insurance |  |  |  |  |  |  |  |
| Short-term Disability Insurance |  |  |  |  |  |  |  |
| Long-term Disability Insurance |  |  |  |  |  |  |  |
| Long-term Care Insurance |  |  |  |  |  |  |  |
| Accidental Death \& Dismemberment |  |  |  |  |  |  |  |
| Other (please specify) |  |  |  |  |  |  |  |
| Other (please specify) |  |  |  |  |  |  |  |

## SECTION 4: SALARY ADMINISTRATION PROFILE

11. Average salary increase percentage for 2004 (or most recent data available):

12. How many hours are included in your standard workweek? (check one box only)
[] 35 hours
] 37.5 hours
[] 38.75

- 40 hours
- Other (please specify) $\qquad$

13. If your organization compensates for overtime, what method is utilized? (check one box only)

- Time and one-halfFluctuating workweek
- Comp timeOther (please specify) $\qquad$

14. Please indicate the period used to calculate overtime. (check one box only)
DailyWeekly
15. Using the period indicated above, after how many hours of work is overtime paid?
16. Which of the factors listed below do you consider in determining salary increases? Use a scale of $1-5$, with 5 being "very important" and 1 being "not important", to rate the importance of the following criteria in determining salary increases. (Circle one number on each line below. Numbers may be used more than once. Check the N/A column for any factor that is not considered.)

| Factors | Level of Importance |  |  |  | N/A |  |  |  |
| :--- | ---: | ---: | ---: | ---: | :--- | :--- | :---: | :---: |
|  | High |  |  | Low |  |  |  |  |
| Merit/Individual Performance | 5 | 4 | 3 | 2 |  | 1 |  |  |  |
| Cost-of-Living | 5 | 4 | 3 | 2 | 1 |  |  |  |
| Years at Organization | 5 | 4 | 3 | 2 | 1 |  |  |  |
| Years in Profession | 5 | 4 | 3 | 2 | 1 |  |  |  |
| Productivity/Billable Hours | 5 | 4 | 3 | 2 | 1 |  |  |  |
| Profitability of Organization | 5 | 4 | 3 | 2 | 1 |  |  |  |
| Market | 5 | 4 | 3 | 2 | 1 |  |  |  |
| Other (please specify) | 5 | 4 | 3 | 2 | 1 |  |  |  |

17. If your organization pays a bonus, what method is utilized? Use a scale of $1-5$, with 5 being "very important" and 1 being "not important", to rate the importance of the following criteria in determining bonuses. (Circle one number on each line below. Numbers may be used more than once. Check the N/A column for any factor that is not considered.)

| Factors | Level of Importance |  |  |  |  | N/A |
| :--- | ---: | ---: | :--- | :--- | :--- | :--- |
|  | High |  |  | Low |  |  |
| Merit/Individual Performance | 5 | 4 | 3 | 2 | 1 |  |
| Years at Organization | 5 | 4 | 3 | 2 | 1 |  |
| Years in Profession | 5 | 4 | 3 | 2 | 1 |  |
| Productivity/Billable Hours | 5 | 4 | 3 | 2 | 1 |  |
| Profitability of Organization | 5 | 4 | 3 | 2 | 1 |  |
| Market | 5 | 4 | 3 | 2 | 1 |  |
| Other (please specify) | 5 | 4 | 3 | 2 | 1 |  |
|  |  |  |  |  |  |  |

## SECTION 5: PERSONNEL COMPENSATION PROFILE INSTRUCTIONS

Please read the following instructions prior to completing the Compensation Profile on page 11. For your convenience and as an alternative to completing this section on paper, we have attached a disk with an Excel worksheet to all past participants.
$\sqrt{ } \quad$ Personnel Compensation Profile: This section involves job matching for seven jobs in the Legal Assistant career progression. Please read the job descriptions carefully and provide information only for jobs that you feel are an equal match. The following is a detail of information to be included for each individual in your organization on this page.
$\sqrt{ } \quad$ Annualization Note: If the person has been in a position for less than a year or on a part-time basis, please provide an annualized amount when indicated. For example, for someone who has been in a position for 6 months, double the amount to provide an estimated 12-month total.
$\sqrt{ } \quad$ Branch Office Note: If you receive assistance from representatives at branch offices in completing this part of the survey, please be sure to collect all forms and return them in one package.
$\sqrt{ } \quad$ Please DO NOT add $\$$ signs, fractions or cents.
On the enclosed data collection form (Compensation Profile), please complete for each person employed in your program at year end 12/31/03 the following:

Column A Position Description: Please review the job descriptions and select the Code that most closely matches the job responsibilities for each position reported, even though the actual title may be different than the titles below.

| Code | Title and Description |
| :---: | :--- |
| $\mathbf{1 0}$ | Legal Assistant Manager: This position is sometimes titled Supervisor, Director of Legal Assistant <br> Services or Paralegal Coordinator. This person reports to an Administrative Partner or Director of |
| Administration. This person is responsible for recruiting, interviewing, and hiring Legal Assistants. The <br> position may also include training Legal Assistants, monitoring work assignments, and handling personnel, <br> financial, and administrative matters for the Legal Assistant program. This person spends 100\% of his/her <br> time as a Manager and does not bill to clients and therefore does not have billable hours and/or a <br> chargeable hours requirement. (For Managers with billable hours, use code 21 below). |  |
| $\mathbf{2 0}$ | Legal Assistant Coordinator/Case Manager: This person reports to a Legal Assistant Manager or <br> Director and supervises legal assistants. He/she may spend some portion of his/her time working as a <br> legal assistant and may have a billable hours requirement. |
| $\mathbf{2 1}$ | Working Manager/Supervisor: This position is sometimes titled Supervisor, Director of Legal Assistant <br> Services or Paralegal Coordinator. This person reports to an Administrative Partner or Director of <br> Administration. This person is responsible for all the same duties listed for Legal Assistant Managers (code <br> $10) ; ~ h o w e v e r, ~ t h e ~ d i f f e r e n t i a t i n g ~ f a c t o r ~ i s ~ t h a t ~ t h i s ~ p e r s o n ~ h a s ~ b i l l a b l e ~ h o u r s ~ a n d / o r ~ a ~ c h a r g e a b l e ~ h o u r s ~$ |
| requirement. |  |

Column B Exempt/Nonexempt: Please indicate if the position is Exempt or Nonexempt. Exempt jobs are typically executive, administrative, professional and outside sales, and are not subject to overtime provisions of the Fair Labor Standards Acts (FLSA). Nonexempt jobs are subject to the overtime provisions of the FLSA.

Column C Years in the Profession: Please indicate the actual number of years (rounded to a whole year) that an individual has been in the profession. For example, for a person who was a Legal Assistant Clerk for one year, a Legal Assistant for two years, Senior Legal Assistant for three years and a Supervising Legal Assistant for four years - the total number of years in the profession would be ten. Time spent as a Legal Secretary is not counted. For 0 to 6 months, always round down to the nearest whole year; for 7 to 12 months, always round up to the nearest whole year.

Column D 2004 Annual Base Salary: Report the most current annual base salary recorded, for the period starting January 1, 2004. (See Annualization Note on page 9.)

Column E 2003 Bonus Award: For those positions that are eligible, report the total cash bonus pay received for work performed in the 2003 calendar year, regardless of time of payment. Bonus pay would be the annual supplemental compensation paid based on met objectives and/or targets. If the person has been in a position for less than a year, provide annualized amount. (See Annualization Note on page 9.)

Column F 2003 Overtime Pay: Provide the total dollars paid for overtime defined as time worked in addition to the normal work schedule, for the 2003 calendar year. (DO NOT Annualize.)

## Column G 2004 Billing Rate: Report the most current billing rate for an individual, for the period

 starting January 1, 2004.Column H 2003 Billable Hours: Provide only the total billable hours worked for clients (whether or not the client was actually billed for those hours) during the 2003 calendar year. (See Annualized Note on page 9.)

Column I Practice Area: Please select the appropriate letter code (select only one per employee). For example, select code "MN" for Legal Assistant Managers doing principally management related work.

| BK | Banking | IN | Insurance |
| :--- | :--- | :--- | :--- |
| BR | Bankruptcy | IP | Intellectual Property/Patents/Trademarks |
| CN | Contracts | LB | Labor |
| CO | Corporate | LI | Litigation |
| CR | Criminal | MG | Mergers/Acquisitions |
| EP | Employment | RE | Real Estate |
| EV | Environmental | RG | Regulatory/Utilities |
| FL | Family Law | SC | Securities |
| GV | Government/Legislative | TE | Trusts/Estates/Probate |
| HC | Health Care | OT | Other |
| IM | Immigration |  |  |
|  |  |  |  |
| NS | No Specialty | MN | Manager |

Column J Zip Code: If individual's work location is different than the zip code provided under participant information, please provide zip code of branch or other location.

Column K Please check (" $\sqrt{ }$ ") to indicate annualized data was provided for reported individual due to new hire or part-time employment status.

## PERSONNEL COMPENSATION PROFILE (continued)

Please complete the table below using the instructions on the preceding pages.

| $\left.\frac{\text { Line }}{\#} \right\rvert\,$ | $\begin{gathered} \hline \text { (A) } \\ \text { Position } \\ \hline \text { Code } \end{gathered}$ |  |  | (D) $\frac{2004 \text { Annual }}{\text { Base Salary }}$ | $\begin{gathered} \text { (E) } \\ \underline{2003} \\ \text { Bonus } \\ \hline \end{gathered}$ |  | (G) Billing Rate |  | (I) <br> Practice Area Code |  | $\begin{gathered} \begin{array}{c} (\mathrm{K}) \\ \frac{\mathrm{V} \text { if }}{} \\ \text { Annualized } \end{array} \\ \hline \text { Data } \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 2 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 3 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 4 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 5 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 6 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 7 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 8 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 9 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 10 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 11 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 12 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 13 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 14 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 15 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 16 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 17 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 18 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 19 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 20 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 21 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 22 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 23 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 24 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |
| 25 |  |  |  | \$ | \$ | \$ | \$ |  |  |  |  |

Please photocopy additional pages as needed.

## Column A - Position Codes

10 Legal Assistant Manage 20 Legal Assistant Coordinator/Case Manager 21 Working Manager/Supervisor 30 Senior Legal Assistant
31 Legal Assistant/Paralega 40 Specialis
50 Legal Assistant Clerk/Project Assistant

Columns C, D, E, F, G, H
Round to nearest whole number

## Column I-Practice Area Code

BK Banking
BR Bankruptcy
CN Contracts
CO Corporate
CR Criminal
EP Employment
EV Environmental
FL Family Law
GV Government/Legislative
GV Government//
HC Health Care
IM Immigration
$\begin{array}{ll}\text { IN } & \text { Immigration } \\ \text { IN } & \text { Insurance }\end{array}$
IP Intellectual Prop./Patents/Trademarks
$\begin{array}{ll}\text { LB } & \text { Labor } \\ \text { LI } \\ \text { Litigation }\end{array}$
MG Mergers/Acquisitions
RE Real Estate
RG Regulatory/Utilitie
SC Securities
TE Trusts/Estates/Probate
OT Other
NS No Specialty/Generalist
MN Manager
(Enter only one Practice Area Code for each employee. For employees who may fit multiple areas, please choose the closest code.)

## PLEASE OPEN TO COMPLETE PERSONNEL COMPENSATION PROFILE SPREADSHEET.

Please include any comments and/or suggestions in the space provided below. We welcome your input.

## AltmanWeil ${ }^{\circ}$ Publications, Inc.

2004 Survey Order Form

## 2004 Annual Compensation Survey for Legal Assistants/Paralegals and Managers

LAMA Member, Participant Price (50\% discount)............................................... \$197.50 $\qquad$
Participant Price (25\% discount) .........................................................................\$296.25 $\qquad$
Non-Participant Price ......................................................................................... $\$ 395.00$ $\qquad$

Please ship to (you may attach your business card):
Name $\qquad$
Title $\qquad$
Company Name $\qquad$
Address $\qquad$
City $\qquad$ State $\qquad$ Zip $\qquad$
Phone $\qquad$ Fax $\qquad$
Email $\qquad$

- Please send an invoice with my order
- Please charge my Visa, MC or American Express
- I am enclosing a check with my order

Card Numbers $\qquad$ Exp. Date $\qquad$
Authorized Signature $\qquad$

PA customers please add 6\% sales tax; Philadelphia customers please add 7\% sales tax. All orders are invoiced when shipped plus shipping and handling costs. If your company is exempt, please provide us with your tax exemption certificate when you place your order otherwise your invoice will be sent with the appropriate tax amount. Prepaid and credit card orders are shipped without additional charges for participants; all others please include $\$ 11.50$ for shipping and handling. To prepay, return this form along with your check made payable to Altman Weil Publications and mail to:

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