



ETHICS DEPARTMENT
REQUEST FOR ASSISTANCE

For CBA Use Only:
Recv.:
Case #:

BEFORE FILLING OUT THIS FORM PLEASE: Read the enclosed pamphlet
\*Try to work out the problem directly with the attorney \*

PLEASE PRINT OR TYPE INFORMATION
\*\*\* WRITE ON ONE SIDE ONLY \*\*\*

INFORMATION ABOUT YOU:

Name(s):

Address:

Phone Number: Home: Work: Other:

Employed:

INFORMATION ABOUT THE ATTORNEY:

Name(s):

Firm(s):

Address:

Phone Number:

Did this attorney represent you? Yes No

If not, whom:

If you answered yes, please answer the following questions; If you answered no, proceed to the next section.

When did the representation begin?

Is the attorney still representing you?

What fees have you paid the attorney?

What fees are still claimed by the attorney?

Did this attorney tell you whether or not s/he has malpractice insurance?
Yes No

If the attorney does not have insurance, did s/he ask you to sign an acknowledgement?
Yes No

**INFORMATION ABOUT THE MATTER INVOLVED:**

What kind of legal matter is this (e.g. Divorce; Probate; Personal Injury; etc.)?

Have you filed a complaint about this anywhere else, and if so, where?

**WHAT HELP ARE YOU SEEKING FROM THE BAR ASSOCIATION?**

**PLEASE TELL US ABOUT THE SITUATION:**

