

Office of Bar Counsel
515 5th Street, N.W.
Building A, Room 117
Washington, D.C. 20001

To Whom It May Concern:

I request a certificate concerning discipline. A check payable to the D.C. Bar in the amount of \$20.00 is attached along with my self-addressed, postage-prepaid envelope. I authorize the Office of Bar Counsel to reveal information regarding complaints filed against me, including any complaint that might be confidential, such as those pending or dismissed.

Signature

Date

Name (Print)

Bar Number

Address

City, State, Zip

Affirmed before me this _____ day of _____.

Notary Public

My Commission Expires