PP

INITIAL REGISTRATION STATEMENT OF PREPAID LEGAL SERVICES PLAN

Pursuant to N.C. Gen. Stat. § 84-23.1(b) and 27 N.C. Admin. Code Chapter 1, Subchapter E, § .0304 of the North Carolina State Bar Regulations for Organizations Practicing Law, all organizations offering prepaid legal services shall register the plans with the North Carolina State Bar on forms provided by the State Bar. Each plan shall be registered prior to its implementation or operation in North Carolina.

The <u>owner</u> or <u>sponsor</u> of the prepaid plan must complete this form and file it with the Secretary of the North Carolina State Bar at the following address:

Secretary of the North Carolina State Bar c/o Joshua T. Walthall, Deputy Counsel North Carolina State Bar P.O. Box 25908 Raleigh, NC 27611

1. Name of Plan:

Please provide complete responses to each of the following items; no items may be left blank. If more space is needed to respond to an item, attach additional documents to this statement. Note that, for registration to be granted, a response is required for each item.

	a.	Owner or Sponsor of Plan
		i. (Name)
		ii. (Title)
2.	Princip	pal place of business for plan:
	a.	Address:
	b.	City:
	c.	State:
	d.	Zip code:
	e.	Telephone Number: ()
3.	Princip	pal address for plan in North Carolina:
	a.	Address:
	b.	City:
	c.	State:
	d.	Zip code:
	e.	Telephone Number: ()

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Comac	t information for plan representative to whom communications with the State Bar will be
directe	d:
a.	Name:
b.	Address:
c.	City: State:
d.	Zip code:
e.	Telephone number: ()
	identify all persons or entities with ownership interest in the plan and the extent of their ts.
Attach	to the report the following:
a.	All terms and conditions of the plan;
b.	All services provided under the plan and a schedule of benefits and schedule of fees;
c.	All plan documents;
d.	All plan marketing and advertising materials;
e.	All plan contracts with the plan's customers;
f.	All plan contracts with plan attorneys;
g.	A list of the names, addresses, bar numbers, and telephone numbers of all North
	Carolina licensed attorneys who have agreed to participate in the plan (this list should be
	alphabetized by attorney last name); and
h.	A signed, notarized certification form from each participating attorney identified in
	subparagraph (g). (Please note that this certification form must be specific to this plan, not to an umbrella organization covering multiple plans.)
	directe a. b. c. d. e. Please interest Attach a. b. c. d. g.

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7.	Please	answer fully the following questions regarding whether the plan is a prepaid legal
	service	s plan as defined by 27 N.C.A.C. Subchapter 1E, Rule .0303. Attach additional sheets of
	paper i	f necessary to answer this section.
	a.	Does the plan, in exchange for any valuable consideration, offer to provide or arrange
		the provision of specified legal services that are paid for in advance of any immediate
		need for the specified legal service ("covered services")? Yes No
	b.	If the answer to question "a" is "yes", list each covered service below.
	c.	Does the plan provide specified legal services at fees that are less than what a non-
		member of the plan would normally pay? Yes No
	d.	If the answer to question "c" is "yes", list the discounted legal services below.
	e.	Are the legal services offered by the plan provided by North Carolina licensed lawyers
		who are not employees, directors, or owners of the plan? Yes No

8. DECLARATION:

I have read the foregoing form and examined the attachments in their entirety. All statements and attachments are true and correct to the best of my knowledge. A non-refundable initial registration fee in the amount of \$100.00, made payable to the North Carolina State Bar, is enclosed.

I have read and understand the rules applicable to prepaid legal services plans as adopted by the State Bar Council and I agree to comply with those rules and ensure compliance on behalf of my prepaid plan. I have also read and understand the law on unauthorized practice as set out in N.C. Gen. Stat. § 84-2.1, 4, and 5. I understand that this plan cannot operate in any capacity until it is registered with the North Carolina State Bar.

I understand that registration of the plan does not constitute approval by the State Bar. I agree that if the plan represents in any communication that it is registered with the State Bar it also shall include a clear and conspicuous statement within the advertisement or communication that registration with the North Carolina State Bar does not constitute approval of the plan by the State Bar.

I understand that the plan is responsible for assuring its compliance with all pertinent laws, including the prohibition on the unauthorized practice of law in N.C. Gen. Stat. § 84-2.1-10.

I will file with the State Bar any amendments to the plan no later than 30 days after the adoption of the amendments but prior to any implementation of the amendments. I understand that the amendments to the plan must be submitted in the same manner as the initial registration and may not be implemented until the amended plan is registered by the North Carolina State Bar in accordance with 27 N.C. Admin. Code Chapter 1, Subchapter E, § .0305 of the North Carolina State Bar Regulations for Organizations Practicing Law.

I will file with the Secretary of the North Carolina State Bar a registration renewal form on or before the deadline of each year after the plan's initial registration.

Date	Signature of Plan Owner or Sponsor
	Typed name of Plan Owner or Sponsor
	Title
	Address
	() Telephone Number
	() Fax Number