



The North Carolina State Bar

Authorized Practice Committee

TO: The North Carolina State Bar
Authorized Practice Committee
PO Box 25908
Raleigh, North Carolina 27611

NC State Bar Complaint Form for Filing by Mail

PLEASE TYPE OR PRINT LEGIBLY
ALL ITEMS MARKED WITH *** MUST BE COMPLETED

I am filing a complaint against the person or entity identified below for activities I believe involve the unauthorized practice of law. I agree to cooperate by furnishing to the representatives of the North Carolina State Bar all pertinent information and records in my possession concerning the alleged activities. I further agree to testify at any hearing that may result from the State Bar's investigation.

*I understand that this complaint is a public record and the North Carolina State Bar may reveal this information to the accused and to others. Initial *** _____*

*I also understand that the State Bar cannot give me legal advice, cannot represent me or intervene on my behalf in a court proceeding, and cannot change court orders. I further understand that if I believe I have suffered damages because of these activities, I should not wait for the State Bar's disposition of my complaint before seeking legal advice or pursuing any legal claim. Initial *** _____*

MY NAME AND ADDRESS

Mr., Mrs., or Ms.*** _____

Address:*** _____ City:*** _____

State:*** _____ Zip: _____ Telephone: () _____

Email: _____

INFORMATION ABOUT THE OTHER PERSON OR ENTITY

Name:*** _____

Address:*** _____ City:*** _____

State:*** _____ Zip: _____ Telephone: () _____

Email: _____

Website: _____

DESCRIPTION OF THE COMPLAINT ***

Please attach a description of your complaint. Be sure to include all the facts that you want the State Bar to consider, including names, dates, and places. Use additional sheets if necessary. **Attach copies (not originals) of any papers that support your complaint.**

Signature:*** _____ Date:*** _____

MAIL COMPLETED FORM AND ATTACHMENTS TO ADDRESS ABOVE