↓Please detach at perforation before returning↓

CERTIFICATE OF REGISTRATION ■ 2007-2009 BIENNIUM

Please complete **all** sections of this form.

REGISTRATION NUMBER	BUSINESS OR FIRM NAME
NAME	TITLE OR POSITION
RESIDENCE ADDRESS	BUSINESS OR FIRM ADDRESS

CITY	COUNTY	CITY	COUNTY
STATE/COUNTRY	ZIP	STATE/COUNTRY	ZIP

DATE ADMITTED TO OHIO BAR		BUSINESS OR FIRM PHONE
DATE OF BIRTH	GENDER	BUSINESS OR FIRM FAX

E-MAIL (please type or print clearly)

INDICATE APPROPRIATE STATUS AND LATE FEE IF APPLICABLE

☐ Active ($350 fee)

☐ Inactive (No fee)

☐ Corporate (Not applicable if admitted in Ohio; $350 fee)

☐ **$50 late fee** (See Instructions)

☐ $300 reinstatement fee (See Instructions)

PLEASE CHECK EVERY RACE YOU CONSIDER YOURSELF TO BE

☐ American Indian or Alaska Native   ☐ Asian

☐ Black or African American   ☐ Native Hawaiian or Pacific Islander

☐ White

ARE YOU HISPANIC/LATINO?   Yes ☐   No ☐

CERTIFICATION

I certify that the information I am providing on this form is true and accurate.

Make check or money order payable to
THE SUPREME COURT OF OHIO

Amount: _____

_____
SIGNATURE OF ATTORNEY   DATE

↓Do not detach lower portion of form↓

INTEREST ON LAWYERS' TRUST ACCOUNTS (IOLTA) AND INTEREST ON TRUST ACCOUNTS (IOTA) REGISTRATION

REGISTRATION NUMBER: NAME:

Please list below all escrow accounts with which you are associated, pursuant to Gov. Bar R. VI and Prof. Cond. Rule 1.15.
Please list additional accounts on a separate sheet.

	ACCOUNT HOLDER	TYPE
FIRST ACCOUNT NAME _____	☐ Individual	☐ IOLTA
Account Number: _____ Financial Institution: _____	☐ Firm	☐ IOTA
SECOND ACCOUNT NAME _____	☐ Individual	☐ IOLTA
Account Number: _____ Financial Institution: _____	☐ Firm	☐ IOTA
THIRD ACCOUNT NAME _____	☐ Individual	☐ IOLTA
Account Number: _____ Financial Institution: _____	☐ Firm	☐ IOTA

I am exempt from the provisions of RC §§4705.09, 4705.10, and/or 3953.231 because (please check one):

☐ 1. My employer on my behalf and/or I do not receive, maintain, or disburse the funds of clients that I represent.

☐ 2. I do not regularly practice in Ohio, and do not receive, maintain, or disburse the funds of clients who reside in the state of Ohio.

QUESTIONS?
Contact the Ohio Legal Assistance Foundation.
Visit www.olaf.org or call 614.752.8919.