

# THE SUPREME COURT *of* OHIO

OFFICE OF ATTORNEY SERVICES

PHV- \_\_\_\_\_

## NOTICE OF PERMISSION TO APPEAR PRO HAC VICE IN AN OHIO PROCEEDING

*Due within 30 days after tribunal grants permission.*

(last)

(first)

(middle)

(maiden)

Name: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Firm/Employer Name: \_\_\_\_\_

Firm/Employer Address: \_\_\_\_\_

Firm/Employer Telephone: \_\_\_\_\_ Firm/Employer Fax: \_\_\_\_\_

Firm/Employer e-mail: \_\_\_\_\_

Ohio proceeding in which permission to appear pro hac vice was granted (include case caption):

\_\_\_\_\_

Case number: \_\_\_\_\_

Date of tribunal's order granting permission to appear pro hac vice: \_\_\_\_\_, 20\_\_\_\_\_.

Name and attorney registration number of associating Ohio attorney (required): \_\_\_\_\_

\_\_\_\_\_

**COPY OF COURT ORDER GRANTING PERMISSION TO APPEAR PRO HAC VICE  
MUST BE INCLUDED WITH THIS NOTICE.**

**SIGNATURE OF PHV ATTORNEY:**

\_\_\_\_\_

**DATE:**

**PRINT NAME:**

\_\_\_\_\_

\_\_\_\_\_