REQUEST FOR INVESTIGATION

Use this form to request an investigation of:
1) an Illinois lawyer;
2) a non-Illinois lawyer who has provided legal services in Illinois; or
3) a non-lawyer who you are claiming has engaged in the unauthorized practice of law in Illinois.

Return the completed form by mail or facsimile to:

ARDC
130 E. Randolph Dr., Ste. 1500
Chicago, IL 60601-6219
Phone: (312) 565-2600 or (800) 826-8625
Fax: (312) 565-2320

ARDC
One North Old Capitol Plaza, Ste. 333
Springfield, IL 62701-1625
Phone: (217) 522-6838 or (800) 252-8048
Fax: (217) 522-2417

1. Your name: ________________________________________________
   Street address: _____________________________________________
   City: ___________________________ State: ______________________ Zip: ______________________
   Home phone: __________ Work phone: __________ Cell phone: __________

2. Name of lawyer/person you want to be investigated: ________________________________
   Name of law firm or business: ____________________________________________
   Street address: _____________________________________________________
   City: ___________________________ State: ______________________ Zip: ______________________
   Phone: __________________________

3. Did you employ the lawyer/person you are complaining about:   Yes _______ No _______
   3a. If you answered yes to question 3:
   When did the employment start? _____________________________________________
   What was the fee agreement? ________________________________________________
   ________________________________________________
   How much have you paid the lawyer/person to date? ____________________________

3b. If you answered no to question 3, what is your connection to the lawyer/person?
   ________________________________________________
4. If your request relates to a court case, please provide the following:

Name of court (for example: Circuit Court of Cook County): ____________________________________________

Name of case: ________________________________________________________________________________

Case number: ________________________________________________________________________________

5. Please explain your complaint(s). Include important dates and names of witnesses and others involved. Use additional pages if necessary. Attach copies of documents that support your complaint, such as fee agreements, receipts, checks, letters and court papers.

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Signature: _________________________________________________________________________________ Date: ___________________________________________________________________