

OFFICE OF CHIEF DISCIPLINARY COUNSEL
Complaint Form

1. Your name and address _____

2. Telephone number(s): Home: _____ Cell: _____ Work: _____
3. The name, address and telephone number of the attorney being complained about. (See note below.)

4. Have you or a member of your family complained about this attorney previously? Yes ___ No ___ If yes, please state to whom the previous complaint was made, its approximate date and disposition.

5. Did you employ the attorney? Answer yes or no and, if "yes," give the approximate date you employed him/her and the amount, if any, paid to him/her. _____

6. If your answer to 5 above is "no", what is your connection with the attorney? Explain briefly. _____

7. Type or write out on a separate piece of paper and send with this form a detailed, factual statement of what the attorney did or did not do that you are complaining about. Please state the facts as you understand them. Do not include opinions or arguments. If you employed the attorney, state what you employed him/her to do. Sign and date such separate piece of paper. Further information may be requested.
(Attach copies of pertinent documents. Please be selective with regard to the documents you include. **Please be advised we cannot return documents submitted to this office. You should retain a copy of all materials you submit.**)
8. If your complaint involves a lawsuit, answer the following, if known:
 - a. Name of court (For example, Circuit Court or Municipal – in what county) _____

 - b. Title of the suit (For example, Smith vs. Jones). _____

 - c. Case # and date suit was filed

 - d. If you are not a party to this suit, what is your connection with it? Explain briefly.

IMPORTANT: Please sign the line below after printing copy

Signature _____ Date _____

NOTE: If you are complaining about more than one attorney, prepare separate complaint forms for each attorney in answer to questions 3 through 8 above on separate sheets if necessary.

Mail To: OCDC, 3335 American Avenue, Jefferson City, MO 65109
TELEPHONE 573-635-7400 FAX NUMBER 573-635-2240

Instructions for Filing

Be sure to give the full and complete name of the attorney about whom you are complaining. Also give his address and telephone number. If you wish to complain about more than one attorney, use a separate complaint form for each attorney. If any of the blank spaces do not apply to your case, write in this particular space N/A (Not Applicable). Be sure to date and sign the complaint form.

On a separate sheet of paper, tell us what your complaint is against the attorney. We also need to know the background of your case: what type of case it is (i.e. divorce, criminal, etc.), when it first started, how you chose the attorney, when you first met with the attorney, what type of agreement you had with the attorney, if the agreement was verbal or in writing, etc., the last date you were in contact with the attorney and what occurred at that time, then tell us in your own words what has happened so far in the case.

Enclosure of Documents

The following are a list of items which will be useful to our office in evaluating your complaint. If you have any of these items in your possession, please include copies of them with your complaint. Do not send original documents, only copies, as we are not able to return your documents to you.

- A copy of any fee agreement which you might have in writing from the attorney. If there was no written agreement, please explain what your understanding was as to how and when the attorney was to be paid for fees, costs, etc.
- Copies of the front and back sides of all cancelled checks and/or copies of receipts you have showing payments made by you to the attorney.
- Copies of any pertinent court documents in your possession that relate specifically to the issues you raise in your complaint.
- If you have hired a new attorney, please provide his or her name, address and telephone number.
- Please do not use a highlighter on any document submitted for review.