

The Florida Bar
651 E. Jefferson Street
Tallahassee, Florida 32399-2300
Toll Free 1-866-352-0707 (ACAP)

IMPORTANT INSTRUCTIONS

Read all instructions carefully before completing the form on the back of this page. **If the form is not properly completed it may be rejected or returned for correction.** You may attach up to 25 additional sheets to supplement any section. If you have not already done so, you should contact the Attorney/Consumer Assistance Program (ACAP) at the above toll free number, to see if they can help resolve the matter about which you wish to complain.

Please note The Florida Bar cannot intervene on your behalf in a civil or criminal case, nor can we give you legal advice. We do not have jurisdiction to consider complaints against judges and many elected officials. Our lawyer regulation department considers whether an attorney has violated our rules of conduct and determines whether under the totality of the circumstances the attorney should receive some type of discipline. The level of investigation varies depending on the complexity of the allegations. If your complaint is closed, you will receive a written explanation of the reasons why. There is no right to appeal a decision not to pursue an investigation.

PART ONE – Required Information. You must give your name, address and phone number, and the name, address and phone number of the subject attorney. The address of the attorney is particularly important as many lawyers have the same or similar names. List only **one** attorney per form (you may copy this form if you need additional copies) and print or type in **black** ink. You can file a complaint only against individual attorneys, not against a law firm. If you have already contacted ACAP, please indicate your ACAP reference number.

PART TWO – Facts/Allegations. Describe each thing about which you are complaining. Recite all of the details, in chronological order, supplying dates where possible. Please number any additional pages you attach. If you have letters, documents or other evidence, you should attach photocopies (DO NOT SEND ORIGINAL DOCUMENTS). It is helpful if you mark your attachments as exhibits (A, B, C, etc.), and refer to them in your description of your complaint. **Please be aware that simply alleging conclusions without setting out facts that support those conclusions will result in the need for the Bar to ask you for additional information and may delay a disposition of your complaint.**

PART THREE – Witnesses. Your inquiry/complaint will be considered even if there are no witnesses. If you have witnesses, attach an additional sheet, listing nothing but witnesses, with the name, address and telephone number for each witness, and include a brief description of the facts about which that witness would testify. If you do not attach a list of witnesses, we will presume that you have no witnesses, other than the attorney and yourself.

PART FOUR – Attempted Resolution. The Florida Bar offers various alternative resolution services for disputes between attorneys and clients, such as the Attorney Consumer Assistance Program (ACAP) at the toll free number on the top of this page. If you have not tried to do so, you should attempt to resolve your matter by writing to the subject attorney, before contacting ACAP or filing a complaint. Even if this is unsuccessful, it is important that you do so in order to have documentation of good-faith efforts to resolve your matter. If you choose to go forward with a complaint, you should specify what resolution efforts you have made on your own behalf, including whether you contacted ACAP – *you should specifically indicate if you contacted ACAP, and if so, what resulted from your use of the services of ACAP.*

PART FIVE– Signature. You must sign the form and certify under penalty of perjury that your allegations are true. Unsworn complaints are not considered.

RETURN TO THE FLORIDA BAR
DEPARTMENT OF LAWYER REGULATION
at the Branch Office nearest the attorney's office address:

5521 West Spruce St.
Suite C49
Tampa, FL 33607-5958

1200 Edgewater Dr.
Orlando, Fl.
32804-6314

Cypress Financial Center
5900 N. Andrews Ave.
Suite 900
Ft. Lauderdale, FL.
33309

Rivergate Plaza
Suite M-100
444 Brickell Ave.
Miami, FL.
33131

Tallahassee Branch
651 E. Jefferson St.
Tallahassee, FL
32399-2300

The Florida Bar Inquiry/Complaint Form

PART ONE: (Read instructions on reverse side.)

Your Name: _____	Attorney's Name: _____
Address: _____	Address: _____
City: _____ State: _____	City: _____ State: _____
Phone: _____ Zip Code: _____	Phone: _____ Zip Code: _____
ACAP Reference No. _____	

PART TWO: (See reverse, part two.) The specific thing or things I am complaining about are:

PART THREE: (See reverse, part three.) The witnesses in support of my allegations are: [see attached sheet].

PART FOUR: (See reverse, part four.)

I did / did not (circle one or the other) attempt to use ACAP to resolve this situation.
To attempt to resolve this matter, I did the following:

PART FIVE (See reverse, part five.): *Under penalty of perjury, I declare the foregoing facts are true, correct and complete.*

Signature

Date