

Board of Overseers of the Bar

P.O. Box 527 | Augusta, ME 04332-0527

T (207) 623-1121 F (207) 623-4175 www.mebaroverseers.org

New Attorney Registration Statement

To be completed by office staff

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\$ _____

CK# _____

Note: For the protection of the public, the Board's records must contain both a home address and office address for every attorney. The Board will only disclose home addresses if no office address is provided. If you do not want Board staff to disclose your home address, please provide an alternate office address. Your alternate address may be a post office box address.

Instructions

1. Complete your office and home contact information.
2. Answer questions 1 - 7 below.
3. Sign, date and return with Annual IOLTA Trust Account Report.

Name: _____ Admission by: Exam Motion UBE Score Transfer

Firm/Company Name: _____ Send mail to: Home Office

e-file email service address: _____ Preferred Contact Method: Email Phone

Office Address: Street/City/State/Zip: _____

Email Address: _____ Phone: ____/____/____ Fax: ____/____/____

Home Address: _____

City/State/Zip: _____

Email Address: _____ Phone: ____/____/____

Date of Birth: ____/____/____ Social Security # ____/____/____ Gender: Female Male Non-Binary

Law School _____ Graduation Year: _____

Maine Admission Date ____/____/____ Date of First Admission to (any) Bar ____/____/____

Please answer the following questions:

1. Practice type: Private Practice Government Judiciary Legal Service In-House/Corporate Counsel Law School
 Military Law Clerk Other

2. How many attorneys are in your office? 1 2 - 5 6 - 9 10-19 20-49 50-99 100+ N/A

3. If you are in private practice, who has agreed to serve as the attorney to provide coverage for your practice should you become disabled, missing or deceased [see M. Bar R. 1(g)(12)]? Please identify your confirmed proxy below:

Attorney: _____ Bar #: _____

4. In addition to Maine, I am admitted in the following jurisdictions and/or courts:

____ Year: _____ Year: _____
____ Year: _____ Year: _____

5. Have you been disciplined in any jurisdiction, excluding Maine, between 7/1/22 and 6/30/23? Yes No If yes, please explain by separate letter.

6. Do you or your law firm carry malpractice insurance? Yes No If not, why? _____

7. Have you been convicted of a crime between 7/1/23 and 6/30/24? Yes No If yes, please explain by separate letter.

Payment Information Registration Fee: \$ 0

Lawyer's Fund or Client Protection: \$
Maine Assistance Program for Lawyers and Judges: \$
Total Enclosed: \$ 0.00

****Note:** No annual registration fee due for those attorneys becoming admitted and sworn in during April, May or June. [see M.Bar R. 4(b)].

Registration Fee Chart

Law Clerk: only pays \$20.00 M.A.P. assessment
New attorney never admitted to another jurisdiction: \$155
New attorney admitted in another jurisdiction for less than 3 years: \$155
New attorney admitted in another jurisdiction for more than 3 years: \$260

Signature _____ Date: _____