

THE UNAUTHORIZED PRACTICE OF LAW COMMITTEE

APPOINTED BY THE SUPREME COURT OF TEXAS

COMPLAINT FORM

Your Information:

1. Name:
2. Address:
3. County of Residence:
4. Contact Phone Number(s):
5. Email Address:

Complaint About:

1. Name:
2. Company/Firm Name:
3. Address:
4. County:
5. Contact Phone Number(s):
6. Email Address or Website Address:
7. What has this person done that you believe constitutes the unauthorized practice of law? (use additional pages, if necessary)
8. Please state any monies paid for fee arrangement you had with this person:
9. Names of other persons who were working with this person:

I certify that the statements contained in this complaint are made in good faith and that I believe them to be true and correct.

Date: _____ Signature: _____

Please attach *copies* of all relevant documents, court papers, letters, ect. **DO NOT SEND ORIGINALS.**

Please return the completed form, including copies of any documentation, to the following:

Texas Unauthorized Practice of Law Committee
P.O. Box 12487
Austin, Texas 78711-2487