

Request for Refund of PLF Reinstatement Fee

I, _____ request a refund of the
PLF reinstatement fee I paid in _____ to clear
the PLF suspension commencing on _____.

Name

Bar No.

Address

Telephone

Signature

Bar use only

OSB Check Request

Please issue a check as follows:

In favor of

Amount \$

as a refund of the PLF reinstatement fee(s), pursuant to the directions of the OSB Board of Governors resulting from the Supreme Court decision in *In re Leisure*, 336 Or 264, 82 P3d 144 (2003).

Dated: _____ Authorized signature: _____

Account Code: 138-7770-013