

CERTIFICATE OF REPRESENTATION IN OREGON ARBITRATION



Attorney: Bar No.: Address:	Title of Matter/Case: Arbitration No.: Arbitration Service/Arbitrator's Name:
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I, the undersigned, am an attorney with my principal office in the State of _____. I am not licensed to practice law in Oregon. I intend to provide legal services to _____ (name of client) in connection with the pending or potential private arbitration described above.

I have read and am familiar with the requirements of Oregon RPC 5.5. In accordance with that rule, I certify that:

- I am an attorney in good standing in every jurisdiction in which I am admitted to practice law, and my good standing in my home jurisdiction is evidenced by the **attached** certificate issued by the highest authority in that state.
 - I am not subject to any pending disciplinary proceedings in any jurisdiction; **or**
 - I am subject to pending disciplinary proceedings in another jurisdiction, the nature and status of which are described in an attachment to this certificate.
- I carry professional liability insurance substantially equivalent to the Oregon State Bar Professional Liability Fund plan, as evidenced by the **attached** certificate of insurance coverage, and I will keep the coverage in place during my representation of the client in this matter; **or**
 - I do not have professional liability insurance substantially equivalent to the Oregon State Bar's Professional Liability Fund plan, and I have notified my client in this matter that I do not have such insurance and that Oregon law requires Oregon lawyers to have such insurance. A copy of the notice letter is **attached**.
 - I am employed as in-house counsel or as a government attorney, and am therefore exempt from the requirement to carry professional liability insurance substantially equivalent to the Oregon State Bar's Professional Liability Fund plan. Proof of my employment is **attached**.

I submit \$200 to the Oregon State Bar as payment of the administrative fee required by Oregon RPC 5.5(e). I understand and agree I will not be entitled to a refund of any portion of the fee if representation of the client is terminated before the conclusion of the arbitration.

I will comply with applicable statutes, laws and procedural rules of the State of Oregon; be familiar with and comply with the Oregon Rules of Professional Conduct; and submit to the jurisdiction of the Oregon State Bar with respect to acts and omissions occurring during my representation of the client in this arbitration.

I certify that I have served a copy of this certificate on the other parties to the arbitration and on the arbitrator or, if the arbitrator has not yet been assigned, that I will do so immediately upon notice of such assignment. I will notify the Oregon State Bar, the arbitrator, and the other parties promptly of any changes in my insurance coverage or of my admission or disciplinary status in any other jurisdiction.

ATTORNEY SIGNATURE: _____ **DATE:** _____