

# Compliance Affidavit

In The Matter Of The Application Of \_\_\_\_\_ )

)

)

)

For Reinstatement As An \_\_\_\_\_ )

Active/Inactive (circle one) )

Member Of The Oregon State Bar )

## BR 8.3 Reinstatement

Not Effective Until Approved by Oregon State Bar

### Compliance Affidavit

1 Full Name \_\_\_\_\_

Bar # \_\_\_\_\_

Date of Birth \_\_\_\_\_

2 Email Address \_\_\_\_\_

3 Residence Address \_\_\_\_\_

Phone \_\_\_\_\_

4 I hereby attest that during the period of my suspension from the practice of law in Oregon from \_\_\_\_\_ to \_\_\_\_\_ (insert dates), I  did  did not (check one) engage in the practice of law in Oregon or in a jurisdiction where I was not authorized by law to do so.

If you did, explain on an attached sheet.

5 I also hereby attest that I complied as directed with the following terms of probation: (circle applicable items)

- a. abstinence from consumption of alcohol and mind-altering chemicals/drugs, except as prescribed by a physician
- b. attendance at Alcoholics Anonymous meetings
- c. cooperation with Chemical Dependency Program
- d. cooperation with State Lawyers Assistance Committee
- e. psychiatric/psychological counseling

- f. passed Multi-State Professional Responsibility exam
- g. attended law office management counseling and/or programs
- h. other (please identify): \_\_\_\_\_
- i. none required

6 I also hereby attest that I have successfully completed Ethics School pursuant to BR 6.4, or am enrolled in the Ethics School next offered by the bar.

State of \_\_\_\_\_ )

) ss.

County of \_\_\_\_\_ )

Applicant \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

Notary Public for \_\_\_\_\_

My Commission Expires: \_\_\_\_\_