

## Statement in Support of RL 11.4 Reinstatement

To: Chief Executive Officer of the Oregon State Bar

From: (Name) \_\_\_\_\_ Bar # \_\_\_\_\_

I, \_\_\_\_\_ (full name), hereby declare:

1. That I was suspended from the Oregon State Bar on \_\_\_\_\_ (month/day/year), and it has been six months or less from the date of my suspension to the date of this statement;

2. That my suspension was for no reason other than failure to pay the Professional Liability Fund assessment, Client Security Fund assessment, or annual membership fees or penalties, or failure to file an IOLTA certificate; or failure to comply with the requirements of the MCLE rules;

3. That during the period of my suspension, I have not been suspended for professional misconduct for more than six months or been disbarred by any court in a jurisdiction outside of Oregon;

4. That I have paid all applicable assessments, fees and penalties required by RL 11.4(2) and RL 11.6 of the Rules of Licensure;

5. I hereby attest that during the period of my suspension, I (check one)  did  did not 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.

6. That I am seeking reinstatement as an (check one)  active  inactive  retired  active pro bono member of the Oregon State Bar and my enrollment status at the time of my suspension was (check one)  active  inactive  retired  active pro bono.

7. That my email address is \_\_\_\_\_

That my business address is (number and street, city, state, zip) \_\_\_\_\_

That my home address is (number and street, city, state, zip) \_\_\_\_\_

That my business phone number is \_\_\_\_\_

That my home phone number is \_\_\_\_\_

= attachment may be necessary

I HEREBY DECLARE THAT THE ABOVE STATEMENT IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND THAT I UNDERSTAND IT IS MADE FOR USE AS EVIDENCE IN COURT AND IS SUBJECT TO PENALTY FOR PERJURY.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE RETURN TO:** Oregon State Bar, Regulatory Services, P.O. Box 231935, Tigard, OR 97281-1935

I, Helen Hirschbiel, Chief Executive Officer of the Oregon State Bar, do hereby certify that the above-named applicant for reinstatement has met all necessary requirements for reinstatement under RL 11.4 of the Rules of Licensure and is hereby reinstated as an  active  inactive  retired  active pro bono member of the Oregon State Bar.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Helen Hirschbiel, Chief Executive Officer