

Allen County Bar Association
Certified Grievance Committee
P.O. Box 1072
Lima, Ohio 45802
<https://www.acbaohio.com>

INSTRUCTIONS

The Allen County Bar Association Certified Grievance Committee (ACBA CGC) investigates allegations of ethical misconduct against attorneys practicing in Allen County, Ohio. It also investigates grievances arising out of fee disputes. Please understand that ACBA CGC has no jurisdiction over and will not become involved in the legal merits of any case. The attorney disciplinary process will not affect or change court decisions made in your case; in addition, ACBA CGC may not give you legal advice.

This form must be completed, signed, and submitted to file a grievance. You may attach additional sheets of paper, if necessary, in order to complete the “Facts of the Grievance” portion of the form. If you wish to file a grievance against more than one attorney, please use one form per attorney. You may make additional copies of the form. You may enclose all forms in one envelope and send them, along with any additional documentation, to the ACBA CGC at the address above. Typed forms are preferred for legibility reasons, however, the form may be handwritten in blue ink. **Do not** use pencil, write in between the lines, or in the margins of the form, affix post-it notes or stickers to the form or use staples. The signature should be in blue ink. If you include documentation with your grievance, send copies only not the originals. **PLEASE DO NOT SEND ORIGINALS.** If additional pages are needed, please use only 8 ½ x 11” size paper. After you have legibly completed the form, please sign and date the form.

The Rules of the Supreme Court of Ohio require that investigations be confidential. You are requested to keep confidential the fact that you are filing this grievance. Only the attorney against whom you are filing your grievance may waive confidentiality. In filing a grievance against your attorney, you are waiving your attorney-client privilege.

The attorney against whom you are filing your grievance will receive notice of your grievance. That attorney is also entitled to receive a copy of your grievance and **may** be asked to respond to your allegations. Your grievance may result in your attorney withdrawing from your case. ACBA CGC cannot prevent an attorney from withdrawing from representation.

Once received, it may take up to ninety (90) days for us to review and respond to your grievance. However, you will be contacted by mail within that time period to advise you whether your grievance will be investigated or dismissed. You may or may not be contacted by mail or telephone to provide additional information. The committee will respond to **inquiries only** from the person(s) who complete(s) the form (is/are named as Grievant(s) under the “Your Name” portion of the form).

The Grievance Process

A grievance sent to The ACBA CGC will be reviewed to determine whether the grievance alleges a violation of the Ohio Rules of Professional Conduct. If there is evidence that supports the allegation of a violation, the grievance will be investigated. Following the investigation, if substantial, credible evidence is found that a violation has occurred, a formal complaint may be filed with the Board of Professional Conduct of The Supreme Court of Ohio. A three-member panel of the Board will review the complaint and determine whether probable cause exists to certify it. If the complaint is certified by the Board, a hearing may be held before a different three-member panel of the Board. The panel considers the evidence and makes a recommendation to the full members of the Board. The full Board then makes a recommendation to the Supreme Court of Ohio. The Court has final say on whether to discipline an attorney and what sanction should be administered. A grievance is confidential until the Board certifies it as a formal complaint. A grievance or complaint can be dismissed at any point in the process.

Please keep this page for your records.

Grievance Form

Ms. _____ Mrs. _____ Miss. _____ Mr. _____

YOUR NAME: _____
Last First MI Phone No.

PERMANENT ADDRESS: _____
Street Email Address

City County State Zip Code

ABOUT WHOM ARE YOU COMPLAINING ?

NAME: _____
Last First MI Phone No.

ADDRESS: _____
Street

City County State Zip Code

This complaint involves an ___ Ethics and/or ___ Fee Dispute issue(s).

Have you filed this grievance with any other agency or bar association? ___ Yes ___ No

If yes, provide name of that agency and date of filing: _____ date: _____

Did you receive a response?: ___ Yes ___ No IF YES, PLEASE ATTACH A COPY

Did this attorney represent you? ___ Yes ___ No Case Name & No.: _____

Date the attorney was hired: _____ Does s/he still represent you?: ___ Yes ___ No

Did you pay the attorney a fee/retainer? ___ Yes ___ No If yes, how much?: _____

Did you sign a written fee agreement/contract? ___ Yes ___ No IF YES, PLEASE ATTACH A COPY

Has the attorney sued you for fees? ___ Yes ___ No

Have you brought civil or criminal court action against this attorney? ___ Yes ___ No

If yes, provide name of court and case number _____

Result of court action: _____

Name and contact information for attorney currently representing you, if different than attorney about whom you are complaining:

Does this grievance involve a case that is still pending before a court? ___ Yes ___ No

If yes, provide name of court and case number: _____

What action or resolution are you seeking from this office?

WITNESSES:

List the name, address, and daytime telephone number of persons who can provide information, IF NECESSARY, in support of your grievance.

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE NO.</u>
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FACTS OF THE GRIEVANCE

Briefly explain the facts of your grievance in chronological order, including dates and a description of the conduct committed by this legal professional. Attach COPIES (DO NOT SEND ORIGINALS) of any correspondence and documents that support your grievance.

The Rules of the Supreme Court of Ohio require that investigations be confidential. Please keep confidential the fact that you are submitting this grievance. The party against whom you are filing your grievance will receive notice of your grievance and may receive a copy of your grievance and be asked to respond to your allegations.

Signature (Blue Ink)

Date

UNSIGNED GRIEVANCES WILL NOT BE PROCESSED.