

# Board of Overseers of the Bar

P.O. Box 527 | Augusta, ME 04332-0527

T (207) 623-1121 F (207) 623-4175 [www.mebaroverseers.org](http://www.mebaroverseers.org)

## New Attorney Registration Statement

To be completed by office staff

C  I

\$ \_\_\_\_\_

CK# \_\_\_\_\_

**Note:** Pursuant to Maine Bar Rule 1(g)(4), every attorney **must provide both an office address and home address.**

The Board will only disclose home addresses if no office address is provided.

### Instructions:

1. Complete your office and home contact information.
2. Answer questions 1 - 7 below.
3. Sign, date and return with Annual IOLTA Trust Account Report.

Name: \_\_\_\_\_ Admission by:  Exam  Motion  UBE Score Transfer

Firm/Company Name: \_\_\_\_\_ Send mail to:  Home  Office

e-file email service address: \_\_\_\_\_ Preferred Contact Method:  Email  Phone

Office Address: Street/City/State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Fax: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Physical Residence Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Social Security # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Gender:  Female  Male  Non-Binary

Law School \_\_\_\_\_ Graduation Year: \_\_\_\_\_

Maine Admission Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of First Admission to (any) Bar \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Please answer the following questions:

1. Practice type:  Private Practice  Government  Judiciary  Legal Service  In-House/Corporate Counsel  Law School  
 Military  Law Clerk  Other

2. How many attorneys are in your office?  1  2 - 5  6 - 9  10-19  20-49  50-99  100+  N/A

3. If you are in private practice, who has agreed to serve as the attorney to provide coverage for your practice should you become disabled, missing or deceased (see M. Bar R. 1(g)(12))? Please identify your confirmed proxy below:

Attorney: \_\_\_\_\_ Bar #: \_\_\_\_\_

4. In addition to Maine, I am admitted in the following jurisdictions and/or courts:

\_\_\_\_\_  
Year: \_\_\_\_\_ Year: \_\_\_\_\_  
\_\_\_\_\_  
Year: \_\_\_\_\_ Year: \_\_\_\_\_

5. Have you been disciplined/sanctioned and/or reinstated in any jurisdiction, excluding Maine, between 7/1/25 and the present?  Yes  No  
If yes, please explain by separate letter.

6. Do you or your law firm carry malpractice insurance?  Yes  No If not, why? \_\_\_\_\_

7. Have you been convicted of a crime between 7/1/25 and the present?  Yes  No If yes, please explain by separate letter.

Send check or money order payment Registration \$ \_\_\_\_\_

\_\_\_\_\_  
Lawyer's Fund for Client Protection: \$20.00 (Mandatory)  
(M.A.P.) Maine Assistance Program for Lawyers and Judges: \$40.00 (Mandatory)  
**Total due Payable to Board of Overseers:** \$ \_\_\_\_\_

### Registration Fee Chart:

Law Clerks ONLY pay (M.A.P.) \$40.00 (Mandatory)  
New attorney never admitted to another jurisdiction: \$155  
New attorney admitted in another jurisdiction for less than 3 years: \$155  
New attorney admitted in another jurisdiction for 3 years or more: \$260

**\*\*Note:** No annual registration fee or mandatory assessments are due for those attorneys becoming admitted and sworn in during April, May or June. [see M.Bar R. 4(b)].

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