



# STATE BAR OF GEORGIA

## Office of the General Counsel

104 Marietta Street, N.W. • Suite 100 • Atlanta, Georgia 30303  
(404) 527-8720 • (800) 334-6865

### **IMPORTANT INFORMATION AND INSTRUCTIONS PLEASE READ BEFORE SENDING A GRIEVANCE**

**Purpose of Grievance:** All lawyers must comply with ethics rules. These rules describe a lawyer's obligation to clients, the courts and the general public in professional dealings. The purpose of this process is to protect the public by disciplining lawyers who violate the ethics rules. Our office cannot consider complaints against judges acting in a judicial capacity.

**Procedure:** Our office begins an investigation when a grievance form is received. If it appears that there might be a violation, then a copy of the grievance is sent to the lawyer for a response. Once the lawyer responds to your grievance, you will have a chance to review the response and rebut what the attorney said. Do not expect an immediate response from us after we receive your rebuttal. You will receive a letter from our office when we complete our investigation. If the lawyer's conduct appears to violate the ethics rules, we send the grievance file to a member of the Investigative Panel of the State Disciplinary Board. The Panel member will formally investigate the matter and report to the full Investigative Panel for a decision. If no violations were discovered, then your complaint is closed and you will receive a written explanation of the reasons why.

**Please Note:** Please understand that the Office of the General Counsel **cannot represent you, give you any legal advice, change the outcome of a court decision, or recover money for you.** There may be times when you feel that the attorney did not represent you in the best possible way and this resulted in an unfavorable outcome. The State Bar of Georgia cannot discipline an attorney for faulty legal advice (malpractice), an unsuccessful trial strategy or **ineffective assistance of counsel.** Therefore, if you think that the lawyer did not represent you correctly or adequately, you should consult with another attorney about your rights.

If you feel that your grievance may be the result of **poor communication or a misunderstanding between you and the attorney,** you should have an open talk with the attorney before you file a grievance. If you are having difficulty reaching your attorney, you may wish to call our **Consumer Assistance Program** at **(404) 527-8759**. If your problem with the lawyer is a **fee dispute**, you may call the **Fee Arbitration Division** of the State Bar at **(404) 527-8750**.

If you wish to file a grievance, please complete the form, sign and date it, make a copy for yourself and **return the original with your original signature to this office.** **If the form is not properly completed, it may be returned for correction.** Be aware that alleging conclusions without explaining facts that support the conclusions will result in either a request for additional information or a dismissal of the grievance.

**PLEASE READ THE INSTRUCTIONS ON THE BACK.**

## **INSTRUCTIONS:**

The State Bar of Georgia is in the process of converting its disciplinary files to electronic media. **All submissions will be scanned into an electronic record.**

The following instructions will allow our office to process your documents in an expedient manner.

- **Limit your initial submission to 20 pages. Send a second copy of the submission if over 20 pages.**
- **Notify us in the initial submission if you have additional documents. We will contact you if they are needed.**
- **We DO NOT accept fax copies of the grievance.**
- **DO NOT send audio tapes, CDs or DVDs unless requested.**
- **DO NOT send medical records.**
- **DO NOT bind (staple or tape) any pages of the grievance.**
- **DO NOT write on the back of pages or use a highlighter.**
- **Use ONLY standard 8 1/2" by 11" paper and do not add tabs or irregular sized pages or photographs.**
- **Notify us of any change in your address or telephone number.**
- **Make your own copy of the grievance before submission.**
- **List one attorney per grievance form.**

**DO NOT SEND US ORIGINAL DOCUMENTS;  
WE CANNOT BE RESPONSIBLE FOR THEIR SAFE-KEEPING  
OR RETURN TO YOU.**



# STATE BAR OF GEORGIA GRIEVANCE CONFIDENTIAL

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK ONLY  
DO NOT ALTER THIS FORM

YOUR NAME: (Mr./Mrs./Ms.) \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
Street or P. O. Box City State Zip

YOUR PHONE NUMBERS: (W) \_\_\_\_\_ (H) \_\_\_\_\_

NAME OF THE ATTORNEY: \_\_\_\_\_  
Fill out a separate form for each attorney. Do not list law firms.

ADDRESS OF THE ATTORNEY: \_\_\_\_\_

DATE OF FIRST CONTACT WITH ATTORNEY: \_\_\_\_\_ DATE OF LAST CONTACT WITH ATTORNEY: \_\_\_\_\_

DOES THIS ATTORNEY CURRENTLY REPRESENT YOU? YES  NO  WAS THIS YOUR ATTORNEY? YES  NO

IS YOUR CASE: CRIMINAL  CIVIL  CASE# \_\_\_\_\_

COUNTY: \_\_\_\_\_ OR FEDERAL DISTRICT: NORTHERN  MIDDLE  SOUTHERN

### CLEARLY DESCRIBE YOUR COMPLAINT AND ATTACH SUPPORTING DOCUMENTS:

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

If more space is needed, please attach other pages. Please do not write on the back.

Return to: **State Bar of Georgia  
Office of the General Counsel  
104 Marietta Street, NW  
Suite 100  
Atlanta, Georgia 30303**

"I affirm that I have read and understand the information and instructions.  
The information I have provided here is true to the best of my knowledge."

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

### OPTIONAL: PLEASE PROVIDE THE NAME AND PHONE NUMBER OF SOMEONE WE CAN CONTACT IF WE HAVE DIFFICULTY CONTACTING YOU:

NAME OF CONTACT PERSON: \_\_\_\_\_

PHONE NUMBERS OF CONTACT PERSON: (W) \_\_\_\_\_ (H) \_\_\_\_\_

IF YOU HAVE A DISABILITY AND NEED ASSISTANCE IN THE GRIEVANCE PROCESS,  
PLEASE CONTACT THE ADA COORDINATOR AT (404) 527-8720 OR (800) 334-6865.