

UNAUTHORIZED PRACTICE OF LAW (UPL) COMPLAINT FORM

A DOLLT VOL

- If you believe that you are the victim of a crime or fraud, you should contact the local police. If you need legal assistance or advice, you should contact a lawyer.
- This complaint form, attachments, and all documents in this process are public documents and may be provided to others as part of a public records request.
- The Washington State Bar Association will communicate with you by email unless you request otherwise.
- If you need assistance with this complaint, please call or email the Washington State Bar Association at (206) 733-5941 or UPL@wsba.org.

ABOUT TOU			
Name (First, Middle, Last):			
Address:			
City:		State:	Zip Code:
Phone:	Email Address:		
THE PERSON YOU ARE COMPLAI	INING ABOUT (RESPO	ONDENT)	
Name (First, Middle, Last):			
Address:			
City:		State:	Zip Code:
Phone:	Email Address:		
This person is or identifies as a:			
☐ Disbarred Lawyer			Paralegal
■ Notario			Other:
☐ Out-of-State Lawyer			



information you have:
What did the respondent (person not authorized to practice law in Washington) do? Check all that apply.
☐ Gave legal advice
Selected, drafted or completed legal forms, documents, or agreements
Appeared in court or in a formal administrative proceeding
Negotiated legal rights or responsibilities for another person
☐ Offered to provide legal services
Please explain:

Was there a fee for the legal services?	
□ No□ Yes. Who paid the fee?	Amount Paid:\$
Attach copies of any fee agreements, receipts, invo payment.	ices, billing statements, or other documents showing
OTHER REPORTS MADE BY YOU	
Have you contacted a law enforcement agency, pro or other agency about this complaint?	secuting attorney, the Attorney General's Office,
☐ Yes ☐ No	
If yes, which agency did you contact?	
•	facts stated in the complaint are, to the best of my form and all attachments may be made public or sent
Signature	Date
Email your complaint to: <u>UPL@wsba.org</u> .	

UPL Complaint – Page 3