

AFFIDAVIT OF COMPLIANCE PURSUANT TO SCR 3.501



KENTUCKY BAR ASSOCIATION

514 WEST MAIN STREET
FRANKFORT, KY 40601-1883
(502) 564-3795
FAX (502) 564-3225
www.kybar.org

Affiant, _____, being sworn, hereby states as follows:

1. My name is _____, By Order entered _____, I was
suspended by the Supreme Court of Kentucky from the practice of law for _____.
A copy of the Court's Order is attached as Exhibit 1.
2. I have complied with all terms and conditions in the Court's suspension Order.
- a. **IF APPLICABLE:** The Court ordered me to refund \$_____ to
_____ within _____ days. I have refunded
that money as ordered; a copy of the check, money order, or other proof of
payment is attached as Exhibit _____.

- b. **IF APPLICABLE:** The Court ordered me to comply with any conditions involving
the Kentucky Lawyer Assistance Program (KYLAP). Attached is a statement from the
KYLAP Director dated _____ stating that Applicant is in compliance with the
Court's suspension Order and any agreement I have with KYLAP.
3. Attached as Exhibit _____ is a certification from the Office of Bar Counsel (OBC) that I
have no pending Client Security Fund Claims, nor any unpaid Client Security Fund awards;
and that I am not the subject of any pending disciplinary matters in Kentucky. I further state
that I am not subject to any pending disciplinary matters in another jurisdiction.
4. Attached as Exhibit _____ is a certification from the CLE Commission that I am in
compliance with SCR 3.685.
5. Certification from the KBA Accounting Department that all costs of the disciplinary
proceedings have been paid. SCR 3.501(2)(a)(i).
6. I am not the subject of any pending criminal matter in any jurisdiction, nor were any criminal
matters in which I was a defendant concluded during the period of my suspension.
7. I am/not a defendant or respondent in any civil or administrative matter where it is alleged
that I committed acts of dishonesty, fraud, deceit, or misrepresentation. [If Applicant is a
defendant, respondent, provide style of the case and a copy of the most recent docket
sheet in the matter, along with a description of the matter].
8. I have not been found in contempt of court during the period of suspension, nor have
I become the subject of a domestic violence order.

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9. I understand and appreciate the wrongfulness of my adjudicated misconduct in the order cited in Paragraph 1.

10. I understand that I may be required to provide additional information regarding my reinstatement; that I have a continuing duty to update this affidavit; and to respond timely to any requests for additional information regarding my efforts to be reinstated.

Further Affiant sayeth not.

AFFIANT

AFFIANT'S ADDRESS

AFFIANT'S PHONE NUMBER

AFFIANT'S BAR NUMBER

COMMONWEALTH/STATE OF _____)

COUNTY OF _____)

The above Affiant appeared before me in person and acknowledged, subscribed and swore to this document before me, a Notary Public in and for the aforesaid State and County, this _____ day of _____, 20____.

NOTARY PUBLIC

My commission expires: _____

CERTIFICATE OF SERVICE

This is to certify that the original of this Affidavit of Compliance was filed with the Disciplinary Clerk of the Kentucky Bar Association, 514 West Main Street, Frankfort, Kentucky 40601, with a copy mailed to the Office of Bar Counsel at the same address on this _____ day of _____, 20____.

AFFIANT

AFFIDAVIT OF COMPLIANCE
2 OF 2