

# COMPLAINT

Office of Professional Conduct  
645 South 200 East  
Salt Lake City, Utah 84111  
(801)531-9110

PLEASE PRINT

Your Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Lawyer or LPP's Name: \_\_\_\_\_

Law Firm: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Does this lawyer or LPP represent you?  YES  NO

If not, please explain your relationship to this lawyer or LPP: \_\_\_\_\_

Have you talked with the lawyer or LPP about the subject of this complaint?  YES  NO

Please give a detailed statement of facts, including dates and places, explaining why you are complaining against this lawyer or LPP: (Please use additional sheets if the provided space is insufficient.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you contacted the Office of Professional Conduct about this lawyer or LPP before?  YES  NO

If yes, please explain when and why: \_\_\_\_\_

\_\_\_\_\_

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

**Pursuant to the Rules of Discipline, Disability, and Sanctions, updated and effective December 15, 2020, all complaints submitted to the Office of Professional Conduct now require an unsworn declaration that the information in the complaint is true and accurate.**

By checking this box, I declare the foregoing information is true and accurate.