

GENERAL INFORMATION ABOUT THE LAWYER COMPLAINT PROCESS

The primary purpose of the lawyer discipline system is to protect the public. The Oklahoma Supreme Court gives the Oklahoma Bar Association, Office of the General Counsel, the authority to investigate complaints against lawyers. Funding for lawyer discipline comes from annual dues paid by all state bar members, not by tax dollars.

The Office of the General Counsel investigates allegations of unethical conduct against lawyers practicing in Oklahoma. If you believe your attorney has acted improperly, you may file a complaint with the Office of the General Counsel. **The Office of the General Counsel cannot investigate complaints of malpractice, decide legal questions, give legal advice or appoint you a lawyer.**

As a client, you have a right to expect competent representation from your attorney. If you are dissatisfied, you may fire the attorney. However, not every reason to terminate your attorney's services is grounds for disciplining the attorney. Although the conduct of an attorney may seem inappropriate, it may not necessarily constitute a violation of the Oklahoma Rules of Professional Conduct, found in Title 5 of the Oklahoma Statutes.

This Office does not mediate or arbitrate fee disputes. If you think your attorney's bill is too high, call the attorney and discuss it. Most lawyers maintain detailed records of time spent and expenses associated with each case and can itemize or explain any charges you may question. **Disputes about legal fees are not usually investigated by the Office of the General Counsel.** Written fee arrangements are always encouraged.

Here are some examples of complaints the Office of the General Counsel has the authority to investigate:

- a lawyer holding money on your behalf will not return the money or provide you with a written accounting of how it was spent
- a lawyer consistently does not respond to questions about your case, inform you about court dates, or appear in court
- a lawyer does not tell the truth or asks you or another person to lie as part of the case
- a lawyer fails to follow through with what was promised or does not perform the action in a timely manner

In your grievance, you will need to describe in full detail the nature of your complaint against the attorney. Be sure to include important dates, what you employed the lawyer to do, and what the attorney did or did not do. Include copies (**not originals**) of any documents you may have, such as a fee agreement, court papers, letters or notes you think will help the Office of the General Counsel understand your complaint.

FILING A GRIEVANCE WITH
THE OKLAHOMA BAR ASSOCIATION

1. By law, any grievance you want to make against an attorney must be in writing and must be signed. The Oklahoma Supreme Court has delegated to the Oklahoma Bar Association the responsibility to investigate grievances filed against attorneys when necessary.

2. From the written information and documents you submit, the Office of the General Counsel may decide:
 - A. To open an investigation,
 - B. To ask you to provide more information,
 - C. To notify you that our office can take no action.

3. If an investigation is opened, you will be notified in writing and when necessary be contacted by an investigator or attorney.

4. **Our investigation is confidential.** Our investigation is limited to the ethical and professional conduct of the lawyer. We cannot provide legal advice, nor can we represent you in any pending litigation. Therefore, you must protect your own legal interests.

5. This form should not be used for complaints against judges. Complaints against judges are handled by the Council on Judicial Complaints. To obtain the required form, contact the Council on Judicial Complaints at 1901 N. Lincoln Blvd., Oklahoma City, OK 73105 or at (405) 522-4800 or (877) 873-7468.

6. Complete the grievance form in its entirety. All of the requested information is important to ensure a complete and thorough investigation of the grievance.

GRIEVANCE FORM

PAGE ONE

RETURN FORM TO: Office of the General Counsel
Oklahoma Bar Association
P.O. Box 53036
Oklahoma City, OK 73152

Complainant Information:

Prefix: Mr. Mrs. Ms.

First Name: _____

Date of birth: _____

Middle Name: _____

Email: _____

Last Name: _____

Telephone:

Address: _____

Home: _____

City: _____

Business: _____

State: _____ Zip code: _____

Mobile: _____

Attorney against whom you wish to file a grievance: (NO LAW FIRMS)

Prefix: Mr. Mrs. Ms.

First Name: _____

Middle Name: _____

Telephone:

Last Name: _____

Business: _____

Address: _____

Home: _____

City: _____

Mobile: _____

State: _____ Zip code: _____

Email: _____

1. Did you employ the attorney? Yes _____ No _____
 - a. Approximate date you employed the attorney: _____
 - b. Was there a written agreement for services? Yes _____ No _____
(If yes, attach copy)
 - c. What, if any, was the amount paid to the attorney? _____
 - d. Date Paid: _____ (attach proof of payment)

***** DO NOT WRITE ON BACK OF FORM *****

***** DO NOT SEND ORIGINAL DOCUMENTS, PROVIDE COPIES
AS ORIGINALS CANNOT BE RETURNED *****

2. If you did not employ the attorney, what is your connection to him/her?

3. Please furnish the following information, if available:
a. Name of Court/County: _____
b. Case Number: _____
c. Title of Suit: _____ vs. _____

d. Approximate Date case was filed: _____
4. If you are or have been represented by any other attorney with regard to this same matter, state the name and address of the other attorney:
Name: _____
Address: _____
City: _____
State: _____ Zip code: _____
5. If you have made a grievance about this same matter to any other Official or Agency, state its (their) name(s), and the approximate date you reported it:

6. In the event a disciplinary hearing is held, would you be willing to appear and testify as a witness? Yes _____ No _____

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7. Names and addresses of witnesses to this grievance:

A.	_____	B.	_____	C.	_____	
	Name		Name		Name	
	_____		_____		_____	
	Address		Address		Address	
	_____		_____		_____	
	City		City		City	
	_____		_____		_____	
	State	Zip	State	Zip	State	Zip
	_____	_____	_____	_____	_____	_____
	Telephone Number(s)		Telephone Number(s)		Telephone Number(s)	
	_____		_____		_____	
	Email Address		Email Address		Email Address	

8. Nature of grievance against the attorney explained in full detail. **(Use a separate piece of paper if necessary).** If you employed the attorney, state what you employed him/her to do. Include what the attorney did or did not do. Further information may be requested.

I hereby certify that I have read the foregoing matters and that they are true and correct to the best of my knowledge.

Your Signature

Date

This grievance form must be signed before it can be considered. It is imperative that you notify this office of an address change. If you are not available as a witness, your grievance may be dismissed.