

Petition for Removal of Authorized House Counsel Annual Fees Delinquency

I, _____, hereby petition The Florida Bar for removal of fees
(Print or type name here)

delinquency and certify:

I have been delinquent in the payment of annual fees since _____(date).

1. I owe:

- a. fees in the amount of: \$_____
- b. late fees in the amount of: \$_____
- c. a reinstatement fee of \$150.00
- d. The total amount due is: \$_____

2. I did not pay these fees *because*

3. Since the date of my initial fees delinquency _____, the following allegations or charges were made against me (include case names and numbers, names of courts or agencies and status of all matters in any jurisdiction):

Criminal charges:

Disciplinary proceedings (by any group or profession):

Other:

No allegations or charges have been made against me during my delinquency status: _____(initial here)

4. My current business address, business email address and telephone number for Bar record purposes:

(Current mailing address)

Physical street address, if different from current mail address (required by Rule 1-3.3)

(_____) _____
Business telephone number

Business email address

5. Under penalty of perjury, I declare the foregoing facts are true, correct and complete.

(Attorney Number)

(Signature of Petitioner)

(Date)