## **UNAUTHORIZED PRACTICE OF LAW COMPLAINT FORM**

Please carefully review this inquiry/complaint form once you have included all information. False statements may subject you to civil liability. More information is available from the State Bar of Michigan, 1-800-968-1442, or at its website, www.michbar.org.

Non-lawyers name:	
Address:	
City:	State:
Zip Code:	Telephone Number:
documents, including cancelled ch	se provide dates, specific facts regarding what happened and all hecks. Failure to include this information may delay the processing a separate sheet and attach it to this form.

Your name:				
Your address:				
City:	State:		Zip code:	
Your telephone numbers:		(h)		(w)
Signature				
Date:				