## SECOND JUDICIAL CIRCUIT PROFESSIONALISM PANEL COMPLAINT FORM

Submit form to the Chair of the Second Judicial Circuit Professionalism Panel:

Attn:	Office of Court Administration		
	301 South Monroe Street, Tallahassee, FL 32301		

## 1. **Referring Party:**

Your Name:	 
Bar No. (if applicable):	 
Address:	 
Telephone:	
Email:	

## 2. Attorney Being Referred:

Name (if more than one, attach information to this form):

Bar No. (if known):	
Address:	 
Telephone:	 
Email:	 

**Alleged Violation** (please refer to specific conduct that is alleged to violate the Standards of Professionalism as established by The Florida Supreme Court and available on the 2<sup>nd</sup> Judicial Circuit Website). You may use additional pages if necessary to complete this complaint. However, please limit your submission to no more than 10 pages including exhibits (if you have additional documents, please make reference to them in your written submission as available upon request). **Please do not submit your original documents or confidential or privileged information. Documents submitted to the Panel may become public record.** 

Facts/Allegations: The specific thing or things I am complaining about are (please attach additional pages if necessary):

The witnesses in support of my allegations are (please attach additional pages if necessary):

By signing this complaint form, I acknowledge and fully understand the following:

**THIS IS NOT A DISCIPLINARY PROCEEDING.** The Local Professionalism Panel is a voluntary, information program intended to be non-punitive, educational and constructive. The Panel shall not have the authority to impose sanctions or disciplinary measures, but shall serve as an effort to avoid further potential disciplinary proceedings through promoting professionalism. However, failure to comply with the recommendations of the Panel may result in the Complaint being sent to The Florida Bar.

Signature:	Dat	e:
Printed Name:		