



## WASHINGTON STATE BAR ASSOCIATION GRIEVANCE AGAINST A LAWYER

**Mail to:**  
**OFFICE OF**  
**DISCIPLINARY COUNSEL**  
**WASHINGTON STATE**  
**BAR ASSOCIATION**  
 1325 Fourth Ave, Ste 600  
 Seattle, WA 98101-2539

### GENERAL INSTRUCTIONS

- Read our information sheet [Lawyer Discipline in Washington](#) before you complete this form.
- If you have a disability or need assistance with filing a grievance, call us at 206-727-8207. We will take reasonable steps to accommodate you.
- If you are having problems communicating with your lawyer, please consider contacting Consumer Affairs at 206-727-8207 before filing a grievance. Se habla Español.
- You can also file your grievance online <http://www.wsba.org/Licensing-and-Lawyer-Conduct/Discipline/File-a-Complaint-Against-a-Lawyer>.

### INFORMATION ABOUT YOU

Mr.      Ms.

Name \_\_\_\_\_  
*First*
*Middle*
*Last*

Street Address or POB \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Ext \_\_\_\_\_ Email Address \_\_\_\_\_

### INFORMATION ABOUT THE LAWYER

*(We cannot accept grievances against law firms or associations. You must specifically name the lawyer against whom you are filing your grievance and a separate grievance form should be completed for each lawyer.)*

Name \_\_\_\_\_  
*First*
*Middle*
*Last*

Bar Number *(If known)* \_\_\_\_\_

Street Address or POB \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

**INFORMATION ABOUT YOUR GRIEVANCE**

Describe **your** relationship to the lawyer who is the subject of your grievance:

I am a client

I am an opposing lawyer

I am a former client

Other: \_\_\_\_\_

I am an opposing party

Is your grievance about conduct in a court case? Yes      No

If yes, what is the case name, file number, and court name? (*for example, Smith v. Jones, Case No. 12-3-45678-9, King County Superior Court*)

Explain your grievance in **your own words**. Give all important dates, times, and places. Attach no more than 25 additional pages, including exhibits. Attach **copies (not your originals)** of any relevant documents. Please do not bind or highlight your documents. We will scan and then destroy the documents you submit. Also note that we will not accept cassette tapes, disks, flash drives, or other electronic recordings with your grievance unless you provide a written transcript.

**AFFIRMATION**

I affirm that the information I am providing is true and accurate to the best of my knowledge. I have read [Lawyer Discipline in Washington](#) and I understand that all information that I submit can be disclosed to the lawyer I am complaining about and others.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_