# **WASHINGTON STATE**

BAR ASSOCIATION

Regulatory Services Department

## **GRIEVANCE AGAINST A LIMITED LICENSE LEGAL TECHNICIAN (LLLT)**

Email to: LLLT@wsba.org	GENERAL INSTRUCTIONS
Or Mail to:	If you have a disability or need assistance with filing a grievance,
Regulatory Services	call us at 206-727-8266. We will take reasonable steps to
Department	accommodate you.
Washington State Bar Association 1325 Fourth Ave, Suite 600 Seattle, WA 98101-2539	<ul> <li>If you are having problems communicating with your legal technician, please consider contacting us at 206-727-8289 before filing a grievance.</li> </ul>

The WSBA administers the licensing and renewal process for Washington licensed legal professionals on behalf of and under rules adopted by the Washington Supreme Court.

#### **Information About You**

Mr. Ms.		
Name:		
First	Middle	Last
Street Address or PO Box: _		
City:	State:	Zip:
Phone Number:	Email Addre	SS:
Information About the Li	mited License Legal Technician (L	.LLT)
	ou are filing your grievance. A separat	businesses. You must specifically name the legal te grievance form should be completed for each
First	Middle	Last
LLLT Number (if known):		
Street Address or PO Box: _		
City:	State:	Zip:
Phone Number:	Email Addre	SS:
	ite 600   Seattle, WA 98101-2539 /sba.org   <b>www.wsba.org</b>	Revised 06/05/2019

## Information About Your Grievance

Describe <b>your</b> relationship to the LLLT who is the subject of your grievance:		
I am a client	I am an opposing legal practitioner	
I am a former client	Other:	
I am an opposing party		
Is your grievance about conduct in a court case? If yes, what is the case name, file number, and court King County Superior Court)	Yes No name? (for example, Smith v. Jones, Case No, 12-3-45678-9,	

Please 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) or 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 recording 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 understand that all information that I submit can be disclosed to the LLLT I am filing a grievance about and to others.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Revised 06/05/2019