



**“Attorney should aspire to render at least 50 hours of pro bono publico legal services per year.” MPRC Rule 6.1**

**Private Attorney Involvement (PAI) Information - Pro Bono & Judicare**

Name: \_\_\_\_\_ Firm Name: \_\_\_\_\_

Office Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

MN Attorney License #: \_\_\_\_\_ Good Standing Y N

Are you qualified neutral under Rule 114? Y N

If you would like an assistant included on correspondence, please list name:

\_\_\_\_\_ and E-mail: \_\_\_\_\_

Pro Bono attorneys volunteer their time. LSNM Pro Bono attorneys receive one hour of CLE credit for six hours of pro bono legal representation, as well as free LSNM sponsored CLE's.

Judicare attorneys receive nominal compensation, currently \$70 per hour, for their time, and may attend LSNM sponsored CLE's for free.

Please make Judicare checks payable to: \_\_\_\_\_

Provide LSNM with your firm's Federal I.D. #: \_\_\_\_\_

If your firm does not have a Federal I.D. #, Please give your SSN: \_\_\_\_\_

Are you a member of the MSBA? Y N

Date of admission to any Bar (specify): \_\_\_\_\_

*I am willing to assist LSNM-eligible clients in the following ways:*

Specialty Law Clinic (Assist in drafting/reviewing pro se forms, etc.)

Criminal Expungement forms

Wills

Family Law Court forms

Telephone Advice Panel (advise clients via telephone from attorney's office)

Brief Services (review documents, draft forms)

Extended Representation (mediate, negotiate or represent fully in litigation)

**I am willing to help at legal clinics/ represent clients in the following counties:**

<input type="checkbox"/>	Becker	<input type="checkbox"/>	Hubbard	<input type="checkbox"/>	Otter Tail	<input type="checkbox"/>	Roseau
<input type="checkbox"/>	Beltrami	<input type="checkbox"/>	Kittson	<input type="checkbox"/>	Pennington	<input type="checkbox"/>	Stevens
<input type="checkbox"/>	Clay	<input type="checkbox"/>	Lake of the Woods	<input type="checkbox"/>	Polk	<input type="checkbox"/>	Traverse
<input type="checkbox"/>	Clearwater	<input type="checkbox"/>	Mahnomen	<input type="checkbox"/>	Pope	<input type="checkbox"/>	Wadena
<input type="checkbox"/>	Douglas	<input type="checkbox"/>	Marshall	<input type="checkbox"/>	Red Lake	<input type="checkbox"/>	Wilkin
<input type="checkbox"/>	Grant	<input type="checkbox"/>	Norma				

**Please mark which areas of law you are interested in assisting clients.**

**P = Pro Bono J = Judicare**

<b>P</b>	<b>J</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Bankruptcy
<input type="checkbox"/>	<input type="checkbox"/>	Consumer Debt/ Garnishment
<input type="checkbox"/>	<input type="checkbox"/>	Conciliation Court
<input type="checkbox"/>	<input type="checkbox"/>	Custody/ Parenting Time
<input type="checkbox"/>	<input type="checkbox"/>	Divorce
<input type="checkbox"/>	<input type="checkbox"/>	HRO
<input type="checkbox"/>	<input type="checkbox"/>	OFP
<input type="checkbox"/>	<input type="checkbox"/>	Grandparent/ Third Party Custody
<input type="checkbox"/>	<input type="checkbox"/>	Stepparent Adoption
<input type="checkbox"/>	<input type="checkbox"/>	Child Support
<input type="checkbox"/>	<input type="checkbox"/>	Family Law Mediation
<input type="checkbox"/>	<input type="checkbox"/>	Contract for Deed Cancellation
<input type="checkbox"/>	<input type="checkbox"/>	Landlord/ Tenant
<input type="checkbox"/>	<input type="checkbox"/>	(Private Subsidized )

<b>P</b>	<b>J</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Name Change
<input type="checkbox"/>	<input type="checkbox"/>	Foreclosure
<input type="checkbox"/>	<input type="checkbox"/>	Public Benefits (MFIP, Snap, MA, Ect.)
<input type="checkbox"/>	<input type="checkbox"/>	Social Security/ SSI
<input type="checkbox"/>	<input type="checkbox"/>	Expungement
<input type="checkbox"/>	<input type="checkbox"/>	Simple Will
<input type="checkbox"/>	<input type="checkbox"/>	General Estate/ Probate Planning
<input type="checkbox"/>	<input type="checkbox"/>	Guardianship/ Conservatorship
<input type="checkbox"/>	<input type="checkbox"/>	Health Care Directive
<input type="checkbox"/>	<input type="checkbox"/>	Power of Attorney
<input type="checkbox"/>	<input type="checkbox"/>	Special Needs Trust
<input type="checkbox"/>	<input type="checkbox"/>	Education (IEP/ Expulsion/ Suspension)
<input type="checkbox"/>	<input type="checkbox"/>	Employment- Wages/ Termination
<input type="checkbox"/>	<input type="checkbox"/>	Unemployment
<input type="checkbox"/>	<input type="checkbox"/>	Tribal Court

I will talk with \_\_\_\_\_ clients per \_\_\_\_\_ week \_\_\_\_\_ month \_\_\_\_\_.

I am willing to help with an clinics/ represent clients/ mediate in the following counties: \_\_\_\_\_

\_\_\_\_\_ Best days/times: \_\_\_\_\_

I am willing to teach a CLE in the following legal area(s): \_\_\_\_\_

I am willing to consult with LSNM attorneys in the following legal area(s): \_\_\_\_\_

**Please submit your completed form to:**  
**pai@lsnmlaw.org or mail to LSNM, 1015 7th Avenue North, Moorhead, MN 56560.**  
 Please call (218) 233-8585 for more information.