



## UNITED STATES DISTRICT COURT DISTRICT OF CONNECTICUT

### **INSTRUCTIONS FOR FILING A COMPLAINT AGAINST AN ATTORNEY**

Below are the instructions for filing a grievance complaint against an attorney admitted to practice in federal court. If the attorney is not admitted here please direct your papers to: The Statewide Grievance Committee, 287 Main St., 2nd Floor, Suite Two, East Hartford, Connecticut, 06118-1885.

When submitting a complaint against an attorney admitted in the United States District Court for the District of Connecticut, pursuant to Rule 83.2 of the Local Rules of Civil Procedure, the papers must contain the following information before the complaint will be filed:

1. Your complete name legibly printed on the first and last pages;
2. Name, address and telephone number of each attorney about whom you are complaining [separate complaint should be completed for each attorney complained about];
3. Nature of your complaint [explain, in chronological order, the details of your complaint];
4. If the complaint concerns the actions of an attorney in a case pending before this court, supply the name of the case, docket number and presiding judge;
5. Attach a verification in the form provided, declaring to the best of your knowledge and belief that the statements made in the complaint are true and correct (attached);
6. Sign and date your complaint in blue ink so we can verify the original. You must print or type your name; address and phone number immediately underneath your signature;
7. Original complaints should be mailed to:  
U.S. District Court  
141 Church Street  
New Haven, CT 06510  
Attn: Grievance Clerk

**VERIFICATION**

PLEASE READ THIS FORM CAREFULLY.  
**CHOOSE ONLY ONE FORM OF VERIFICATION.**

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(1) Check this box and sign the form. You Do Not Need A Notary Public If You Check This.

[ ] I declare under penalty of perjury that:

(a) I have read Rule 83.2 of the Local Civil Rules of the United States District Court for the District of Connecticut, governing complaints against attorneys, and

(b) The statements made in this complaint (including attachments [if appropriate]) are true and correct to the best of my knowledge.

Executed on: \_\_\_\_\_  
(Date) (Signature)

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(2) Check this box and SIGN THE FORM IN THE PRESENCE OF A NOTARY PUBLIC.

[ ] I swear (affirm) that:

(a) I have read Rule 83.2 of the Local Civil Rules of the United States District Court for the District of Connecticut, governing complaints against attorneys, and

(b) The statements made in this complaint (including attachments [if appropriate]) are true and correct to the best of my knowledge.

Executed on: \_\_\_\_\_  
(Date) (Signature)

Sworn and subscribed to before me on: \_\_\_\_\_

My commission expires on: \_\_\_\_\_

(Notary Public Signature): \_\_\_\_\_

(Seal)