

**LYCOMING LAW ASSOCIATION
FEE DISPUTE COMMITTEE
DATA SHEET**

The Complainant **MUST** provide the information requested below and return it with the complaint.

1. List your full name and address, as well as that of the party against whom you are making a fee dispute claim. Be sure to include suite numbers, zip codes, phone and fax number and e-mail addresses.

(Your name and address, as Complainant)

(Other party, as Respondent)

Day Phone: _____

Day Phone: _____

Fax: _____

Fax: _____

Email: _____

Email: _____

2. Reason for dispute: _____

3. Amount of money in dispute: _____

4. Type of legal matter (domestic, criminal, etc.) _____

5. Did you or the Respondent file suit in court or with a magisterial district judge with regard to this fee dispute? _____

If yes, give the hearing date and identify who filed the action: _____

I have read and agree to be bound by the Lycoming Law Association Fee Dispute Committee Rules.

Date

Signature of Complainant