



# The Disciplinary Board

of the Supreme Court of New Mexico

## LAWYER DISCIPLINARY HISTORY REQUEST FORM

Print, complete, and fax or mail request to:

**The Disciplinary Board**

**P.O. Box 1809**

**Albuquerque, New Mexico 87103-1809**

**Fax No.: (505) 766-6833**

Please allow a minimum of 5 business days for processing. Requests are not accepted electronically.

**IMPORTANT: THIS REQUEST FORM MAY ONLY BE USED BY AN ATTORNEY TO REQUEST THE RELEASE OF INFORMATION ABOUT THE ATTORNEY'S OWN DISCIPLINARY HISTORY.**

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

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Bar No.: \_\_\_\_\_

Purpose of Request: \_\_\_\_\_

**Initial one or both choices:**

\_\_\_\_\_ I hereby request that a certificate be mailed to me (at the above address) which states my current membership status, any formal disciplinary charges which have been filed against me, and any discipline, formal or informal, that has been imposed on me.

\_\_\_\_\_ I hereby request the release of information concerning the disposition of all complaints filed against me. Please send the information to the contact person below.

Contact Person: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

**I, THE UNDERSIGNED, HEREBY WAIVE MY RIGHT TO CONFIDENTIALITY FOR THE PURPOSE OF THIS REQUEST.**

\_\_\_\_\_  
Signature