



MDEC Attorney Add / Update Form



Once you click **SUBMIT** at the bottom of this form it will be sent to: mdcourts@service-now.com

Your Name:

Your Phone:

Your Email:

Requested Action:

Client Protection Fund (CPF)/Bar Number:

This number is important to insure that the correct attorney is updated. If this number is not known it can be found within MDEC or by searching at <http://mdcourts.gov/lawyers/attylist>

Change Request (Enter NEW Information here)

First Name:

Middle Name:

Last Name:

Other / Maiden

Name: Firm / Agency Name:

Address Line 1:

Address Line 2:

City:

State:

Zip Code:

Country:

Phone Number:

Work:

Fax:

Cell:

Primary Email Address:

Additional Email Address:

I confirm that all active and inactive cases should be updated to reflect this address change. If not, please list the applicable case(s).

Other:

Date:

NOTE: Please submit a change of address in all of your pending cases to ensure that the court is aware of the change and that case parties are notified.