# IN THE SUPREME COURT OF TEXAS

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Misc. Docket No. 05-9171

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## AMENDED EMERGENCY ORDER PERMITTING LAWYERS DISPLACED BY HURRICANE KATRINA OR HURRICANE RITA TO CONTINUE REPRESENTING CLIENTS FROM TEMPORARY OFFICES IN TEXAS
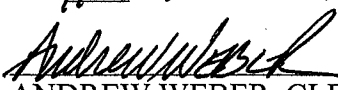
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**ORDERED** that:

1. Until further order of this Court, and notwithstanding Texas Government Code chapter 81, subchapter G, an attorney holding a valid law license issued by Louisiana, Mississippi, or Alabama, who is in good standing with the attorney's respective state bar, who is displaced from the attorney's home jurisdiction due to Hurricane Katrina or Hurricane Rita, and who, no later than November 7, 2005, completes and provides to the State Bar of Texas the Registration for Temporary Practice from Texas form attached to this order, is permitted to practice law until May 31, 2006, from a location in Texas as if the attorney were located in the state in which the attorney is licensed. If the State Bar does not receive this completed form on or before November 7, 2005, the displaced attorney may be subject to prosecution for the unauthorized practice of law or other sanctions or actions. Upon written request submitted to the Membership Department of the State Bar of Texas, exceptional circumstances may be considered for untimely submission of the registration form. No fee is required for the registration described in this order.

2. An attorney who is retained by a legal services program funded by the Texas Equal Access to Justice Foundation and who, though not displaced from the attorney's home jurisdiction due to Hurricanes Katrina or Rita, otherwise meets the requirements of this order, is allowed to practice law through the legal services provider under the terms of this order.

As ordered by the Supreme Court of Texas, in Chambers,

With the Seal thereof affixed at the City of Austin, this //*th* day of October, 2005.

_Andrew Weber_

ANDREW WEBER, CLERK
THE SUPREME COURT OF TEXAS

# The Supreme Court of Texas

## REGISTRATION FOR TEMPORARY PRACTICE FROM TEXAS

**Pursuant to Emergency Order of the Supreme Court of Texas,**
**Misc. Docket No. 05-9171, issued September 30, 2005**

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### THIS FORM MUST BE COMPLETED IN FULL AND RECEIVED BY THE STATE BAR MEMBERSHIP DEPARTMENT ON OR BEFORE NOVEMBER 7, 2005

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**Provide the following information** (pre-displacement):

Attorney Name _____

Address of Permanent _____
Residence _____

_____

Telephone Number(s) _____
E-mail Address _____

**List every state in which you are licensed and provide the other information requested for each state:**

| State | Bar Number | Date Licensed | Good Standing (Y or N) |
| --- | --- | --- | --- |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

**Provide Texas contact information. You must update this information within five business days of any changes:**

Texas Business Address_____

_____

Telephone Number(s) _____
E-mail Address _____

If associating with a Texas Attorney, please provide
the name and Texas Bar Number of the Texas Attorney _____
Do you intend to apply for admission to the State Bar of Texas? ____Yes ____No

### AFFIDAVIT

Before me, the undersigned authority, personally appeared the attorney first named above, who, being by me duly sworn, deposed as follows: I am of sound mind and capable of making this affidavit. I hereby swear or affirm that: (1) the information on this form is true and accurate; (2) I am currently in good standing with the authority(ies)

regulating the practice of law in the state or states listed above; (3) because I was and remain displaced due to Hurricane Katrina or Hurricane Rita, I will be temporarily practicing, from a location in Texas, the law of the jurisdiction(s) in which I am licensed; and, (4) I acknowledge and agree that, while engaging in such practice from Texas, I am subject to the attorney professional conduct and disciplinary rules of the jurisdiction(s) in which I am licensed and to the Texas Rules of Disciplinary Procedure and the Texas Disciplinary Rules of Professional Conduct.

Your Signature: _____

SWORN TO AND SUBSCRIBED before me on the _____ day of _____, 2005.

My commission expires:_____,20__ .

Signature of Notary: _____
Notary Public, State of Texas

Notary's printed name:_____

**Return the original to: Membership Department of the State Bar of Texas, P.O. Box 12487, Austin, Texas 78711-12487, Fax: (512) 463-5817 (original must still be mailed). If you have any questions, please call the Membership Department at 1-800-204-2222, ext. 1383.**