

VERIFICATION OF RECIPROCITY FORM

Instructions

The following Reciprocal Jurisdictions have appointed a proper official to complete the Verification of Reciprocity Form for their jurisdiction.

Unless your reciprocal jurisdiction is listed below, **ALL** other Verification of Reciprocity Forms must be submitted to the **Court of Last Resort** in your reciprocal jurisdiction for completion by a Justice/Judge of said Court.

Reciprocal Jurisdiction	Proper Official
Indiana	Office of Admissions and Continuing Education Attn: Executive Director Bradley W. Skolnik
Kentucky	Board of Bar Admissions Attn: Elizabeth Feamster
Minnesota	Minnesota Board of Law Examiners Attn: Director
Montana	State Bar of Montana Attn: Kathie Lynch, Montana Admissions Administrator
New Jersey	New Jersey Board of Bar Examiners Attn: Clerk
North Carolina	North Carolina Board of Bar Examiners Attn: Nikki Leach, Comity Analyst
Ohio	Office of Attorney Services Attn: Gina White Palmer
West Virginia	West Virginia Board of Law Examiners Attn: Madeleine Jaeck

VERIFICATION OF RECIPROCITY FORM

STATE of _____/DISTRICT OF COLUMBIA*:

I, _____, Justice/Judge or (appointed proper official as listed on page 1)
_____ (title) of the State of _____/District of Columbia*, do
hereby certify that _____ was admitted to
practice law before the Court of last resort in said State/District on _____ (m/d/yyyy).

I further certify that attorneys from the Commonwealth of Virginia [] are; [] are not (Check one)
admitted to practice law on motion or reciprocity in this State/District without requiring a written bar examination,
provided other requirements of this jurisdiction are met.

Given under my hand this _____ day of _____, 20_____

Signature: _____

PLEASE NOTE: If the foregoing form is "signed" by a Justice/Judge using a stamped signature, as opposed to an original signature, the Clerk of Court must complete the following:

I, _____, Clerk of the _____,
do hereby certify that _____,
whose name is stamped on the foregoing certificate, is a Justice/Judge of the Court of last resort of the State of
_____/District of Columbia*, and that the foregoing represents his/her true and
genuine signature.

By my hand and the seal of said court, this _____ day of _____, 20_____

Signature: _____

(SEAL)