

HOW TO SUBMIT A REQUEST FOR INVESTIGATION

Filing a Request for an Investigation of an Attorney | Effect on Your Legal Rights | Other Information Provided by the ARDC

REQUEST FOR INVESTIGATION OF A LAWYER FORM

Request an investigation of an Illinois lawyer by printing, completing and returning this form to the Chicago or Springfield ARDC offices. The Chicago office is located at 130 East Randolph Drive, Suite 1500, 60601-6219. The Springfield office is located at the One North Old Capitol Plaza, Suite 333, 62701-1625.

1. Your name: Laura Wahid

Street Address: 10155 California Court

City: Crown Point State: IN Zip: 46307

Home Phone Number: _____

Cell Phone Number: 330-701-0313

Business Phone Number: _____

2. Name of Lawyer you are complaining about: Michael Friedman

Name of Law Firm: Michael T. Friedman and Associates

Street Address: 155 North Michigan Avenue, Suite 1000

City: Chicago State: IL Zip: 60601

Phone Number: 312-606-8816

3. Did you employ the lawyer?

Yes

If yes, when was the lawyer hired? _____

How much did you pay for the lawyer? _____

No

If no, what is your connection to the lawyer? _____

4. If your complaint relates to a lawsuit, please give the following:

