

COOK COUNTY ATTORNEY CODE REQUEST FORM

Please complete the information requested below. Indicate whether this request is for a firm or individual attorney code. Also indicate whether the request is for a new attorney code or change of contact information. If you are requesting a firm attorney code, an attorney in that firm must provide his/her documentation as described below. NOTE: NAME INFORMATION CANNOT BE CHANGED!

Documentation needed: All requests must be accompanied by copies of your current and valid Illinois Attorney Registration & Disciplinary Commission (ARDC) card AND your valid government-issued driver's license or identification card. If you are an out-of-state attorney not licensed to practice law in Illinois, please contact (312) 603-5469 for further information.

(NOTE, YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT YOUR ARDC INFORMATION.)

Requests, except for those in person, will be processed from 9:00 a.m. to 3:00 p.m., Monday through Friday, excluding court holidays. REQUESTS RECEIVED AFTER 3:00 p.m. WILL BE PROCESSED ON THE FOLLOWING BUSINESS DAY.

You may submit this request any of the following ways:

- 1. Via facsimile: Fax your completed request and copies of the above supporting documents to (312) 603-3348.
2. Via email: Email your completed request and copies of the above supporting documents to attorneycode@cookcountycourt.com.
3. In person: Bring your completed request along with the original supporting documents to the Law Division in Room 801 of the Richard J. Daley Center, 50 West Washington Street, Chicago, Illinois 60602 or the Civil Department at any of the Suburban Districts (processed 8:30 a.m. to 4:30 p.m., entire business day).
4. Via U.S. Mail: Mail your completed request and copies of the above supporting documents to the Law Division in Room 801 of the Clerk of the Circuit Court of Cook County, Richard J. Daley Center, 50 West Washington Street, Chicago, Illinois 60602.

Please select the method you wish to be notified of your attorney code: [X] Email [] Fax [] Mail

Please print legibly.

NEW ATTORNEY CODE: Status: [] Firm [X] Individual

Firm Name: (As it will appear on the electronic docket)

Attorney Name: Haytham Faraj (First, Middle, Last, as it appears on your ARDC card -As it will appear on the electronic docket)

Street Address: 22167 Morley Ave.

City, State: Dearborn MI Zip Code: 48124

Telephone Number: (760) 521-7934 Fax Number: (202) 280-1039

Email: Haytham@PuckettFaraj.com ARDC Number: 6286135

CHANGE OF CONTACT INFORMATION: Status: [] Firm [] Individual

Cook County Firm or Individual Attorney Code:

Firm Name: (As referenced on previous Request Form)

Attorney Name: (As referenced on previous Request Form)

Street Address:

City, State: Zip Code:

Telephone Number: () Fax Number: ()

Email: ARDC Number:

REQUESTOR (must be completed if this is a firm request):

Date:

Requestor (if a firm request):

Requestor ARDC Number (if a firm request):

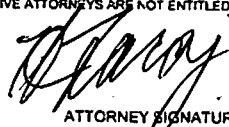
Office Use Only

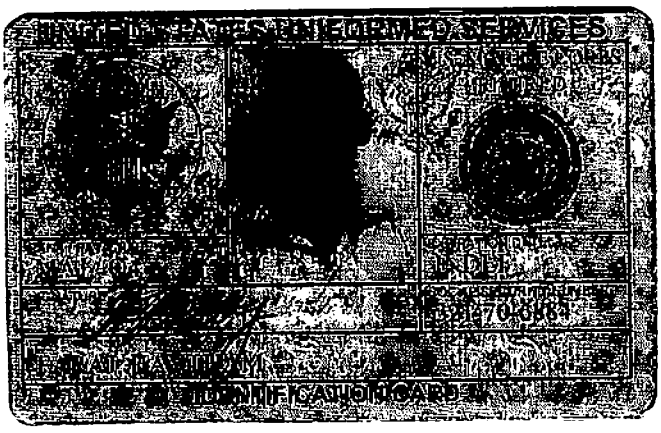
[] Attorney Code:


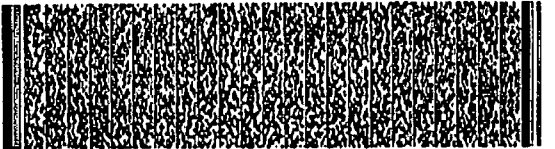
[] Attorney Notified

[] Attorney Code information changed.

Operator:

ATTORNEY REGISTRATION AND DISCIPLINARY COMMISSION
of the
2011 SUPREME COURT OF ILLINOIS **2011**
REGISTRATION NO. STATUS ADMITTED
6286135 **Active** **11/10/2005**
Haytham Faraj
Web Access ID: 1539
INACTIVE ATTORNEYS ARE NOT ENTITLED TO PRACTICE LAW

ATTORNEY SIGNATURE



DATE OF BIRTH 1968AUG01	WEIGHT 175	HEIGHT 69	HAIR COLOR BR	EYE COLOR BR
				
DATE OF ISSUE 2008SEP24	MEDICAL DIRECT: YES	CIVILIAN YES	EFF DATE 2008AUG01	EXP DATE 2033JUN30
				
DD FORM 2 (RETIRED) OCT 93		OUSD(P&R) OCT 2005 PROPERTY OF US GOVERNMENT		