

**FIFTH JUDICIAL CIRCUIT PROFESSIONALISM PANEL**

**COMPLAINT REFERRAL FORM**

**Please submit the completed form, together with any supporting documents by hand delivery or U.S. Mail to Grace A. Fagan, Esq., General Counsel, Fifth Judicial Circuit, Hernando County Courthouse, Suite 200C, 20 N. Main Street, Brooksville, FL 34601 or by email to [gfagan@circuit5.org](mailto:gfagan@circuit5.org). The complaining party may be asked to swear to the veracity of the facts alleged in the complaint as a prerequisite to the panel proceeding.**

**Your name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone number:** \_\_\_\_\_

**Name of lawyer about whom complaint is made:** \_\_\_\_\_

**Lawyer's address:** \_\_\_\_\_

**Telephone number:** \_\_\_\_\_

**COMPLAINT**

**Complaints cannot be made against a firm. You must name an individual lawyer or lawyers. Please describe your connection to the lawyer. Then please state in no more than two pages what the lawyer did or failed to do that you feel was unprofessional. You may also attach copies of any documents that would help explain or support your complaint.**

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**Signature**

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**Date**