

**TWELFTH DISTRICT COURT OF APPEALS
APPOINTED COUNSEL REGISTRATION FORM**

In cases where appointment of appellate counsel is necessary, such appointment shall be sought in the first instance in the trial court. See Loc.R. 9(C)

I request that my name be added to the Twelfth District Court of Appeals' list of counsel willing to accept appointments on appeals pending before the court from the following counties (please check all that apply):

BROWN	BUTLER	CLERMONT	CLINTON
FAYETTE	MADISON	PREBLE	WARREN
	Criminal Appeals	Juvenile Appeals	

Name _____
Attorney Registration Number

Address City State Zip

Telephone: _____

Fax: _____

Email: _____

I hereby certify that I have reviewed [Ohio Admin. Code Section 120-1-10](#) and either have the qualifications necessary to accept such appointments or am working towards meeting those qualifications by completing the appropriate training and/or continuing legal education courses as soon as I reasonably can.

Signature

Date

Please return form to:

Twelfth District Court of Appeals
Attn: Nicole Rutherford, Administrative Secretary
1001 Reinartz Blvd.
Middletown, OH 45042