

**United States District Court for the Northern District of Illinois
E-Filing Registration Form for Attorneys Granted Leave to Appear Pro Hac Vice**

<p>NOTE: This form is to be completed only by attorneys who have been granted leave to appear pro hac vice pursuant to Local Rule 83.14. Forms and information on appearing pro hac vice may be found on the District Court’s web site (www.ilnd.uscourts.gov).</p>	<p>Instructions: Complete this form to request an electronic filing (e-filer) account from the U.S. District Court. Complete a hard copy of this form, sign it, and submit it to the address shown below. After the information on the form has been verified, your e-filer login name and password will be sent to your e-mail address.</p>
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First Name	Middle Name	Last Name	Generation, <i>e.g.</i> , Sr., Jr.
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E-mail address: _____

Firm/Affiliation: _____

Street Address: _____ Suite: _____

City: _____ State: _____ Zip: _____ Tel. #: _____

Enter case number and the date leave to appear pro hac vice was granted.

Case Number: _____ Date leave to appear granted: _____

If you are currently a registered e-filer in another court, identify that court. _____

I have read Local Rules 5.2, 5.5, and 5.9, and the Court’s General Order on Electronic Case Filing (Check box to indicate you have read the applicable rules and General Order).

I hereby agree to abide by all Court rules, orders, policies, and procedures governing the use of the electronic filing system used in the District Court. I also consent to service by electronic means in the circumstances permitted under those rules and orders. I further understand that the combination of user id and password will serve as the signature of the attorney filing the documents pursuant to Rule 11 of the Federal Rules of Civil Procedure, the Federal Rules of Criminal Procedure, and the Local Rules of this Court. Therefore, as a participating attorney, I recognize that I am personally responsible for the security of my password and agree to notify the Clerk of Court if I believe that my password has been compromised. Also, as a participating attorney, I will promptly notify the Clerk of Court of changes in my personal data, *e.g.*, name, e-mail address, firm, mailing address, telephone, and I will promptly update the appropriate data in the ECF system.

Mail or hand deliver to
Clerk of Court—ECF
U.S. District Court
Room 2050

219 South Dearborn Chicago, IL 60604	Signature	Date
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