

UNITED STATES DISTRICT COURT- EASTERN DISTRICT OF MISSOURI

E-FILING REGISTRATION FORM

Complete Part A, including your

original signature, and present it to the Clerk's Office at the address below. This form cannot be submitted electronically, but it can be filled out on-line at http://www.moed.uscourts.gov/cmecf/Form_EFilingRegistration.pdf.

Name: _____
Firm: _____
Address: _____
City/State/Zip: _____
Phone: _____
Fax: _____
E.D. Missouri Bar Number: _____
Date of Birth: _____
Appointment Types: [] Criminal [] Gen. Civil
[] Employment [] All

PART A. I request access to the District Court Electronic Case Filing (ECF) system.

Primary e-mail address: _____

Secondary e-mail address: _____

E-mail software used: _____

[] I have an existing PACER account.

[] My firm has an existing PACER account.

A PACER account is necessary for viewing electronic documents. (http://pacer.psc.uscourts.gov)

NOTE: Local rules may be found at: http://www.moed.uscourts.gov/CMECF/CMECF_loclrule.pdf

[] I CERTIFY THAT I AM A MEMBER IN GOOD STANDING OF THE BAR OF THIS COURT AND I AM FAMILIAR WITH THE ELECTRONIC FILING RULES OF THE EASTERN DISTRICT OF MISSOURI.

[] I AM A GOVERNMENT ATTORNEY EXEMPT FROM MEMBERSHIP PURSUANT TO LOCAL RULE 83-12.01 BUT I AM FAMILIAR WITH THE ELECTRONIC FILING RULES OF THE EASTERN DISTRICT OF MISSOURI.

[] I HAVE FILED A MOTION FOR (OR HAVE BEEN GRANTED) ADMISSION PRO HAC VICE IN CASE # _____ AND I AM FAMILIAR WITH THE ELECTRONIC FILING RULES OF THE EASTERN DISTRICT OF MISSOURI.

[] ATTORNEYS IN MULTI-DISTRICT LITIGATION CASES IN THIS COURT ARE NOT REQUIRED TO FILE A MOTION FOR ADMISSION PRO HAC VICE. I AM AN ATTORNEY OF RECORD IN MDL CASE # _____ AND I AM FAMILIAR WITH THE ELECTRONIC FILING RULES OF THE EASTERN DISTRICT OF MISSOURI.

By registering under this rule, attorneys consent to electronic service by the court of all documents, including orders and judgments. See Local Rule 5-2.12, Fed.R.Civ.P. 5, Fed.R.Civ.P. 77, and Fed.R.Crim.P. 49.

Attorney's signature: _____

YOUR LOGIN/PASSWORD WILL BE MAILED TO YOU AFTER THE FORM HAS BEEN PROCESSED. THIS IS YOUR ELECTRONIC SIGNATURE FOR ECF. PLEASE MAINTAIN ACCESS TO THIS INFORMATION.

Return this form via hand delivery or via mail to:
Clerk, U.S. District Court
E-Filing Registration
111 South Tenth Street, Rm. 3.300
St. Louis, MO 63102

Court Use Only
E-Filing Login Assigned: _____
E-Filing Password Assigned: _____
[] "You are registered" e-mail sent [] Copy of form mailed to attorney
[] Attorney's e-mail record updated [] Copy of form to OSU

PART B.

APPLICATION FOR E-FILING EXEMPTION

Pursuant to Local Rule 3-2.10, I hereby state that I do not have the technical capacity to file documents with the Court electronically at this time, and therefore ask for a 90 day exemption from electronic filing requirements. I will notify the Court when my circumstances change. I understand that I must submit the CM/ECF requirements questionnaire to support my exemption request (questionnaire available on the court's website at www.moed.uscourts.gov).

Attorney's signature: _____

Date: _____

Attorney's name (please print): _____

Phone number: _____

***** (For Court Use Only) *****

[] REQUEST IS DENIED _____

Date: _____

[] REQUEST IS GRANTED _____

Date: _____