

I, \_\_\_\_\_, understand that each Department of Justice  
*(Name)*

attorney must, at all times while employed at the Department, maintain “active” membership in the bar of at least one State, territory, or the District of Columbia. I hereby certify that I am an “active” member of the bar in \_\_\_\_\_ and that my Bar  
*(State, territory or District of Columbia)*

membership number (if any) is \_\_\_\_\_.

I further understand that failure on my part to maintain an “active” bar membership at any time during my employment as an attorney with the Department will subject me to Office of Professional Responsibility referral and may result in my pay being withheld and disciplinary action.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date