UNITED STATES DISTRICT COURT - MIDDLE DISTRICT OF ALABAMA in Montgomery IF YOU LAST RENEWED IN 2012 OR WERE ADMITTED DURING CALENDER YEAR 2012

you are due to renew by March 1, 2018

In accordance with the provisions of F.R.CIV.P.5(b)(2)(E), I understand that service, except for original process, will be given to me by electronic means to the e-mail addresses listed above. I agree to waive the provisions of F.R.Civ.P.77(d) and F.R.Crim.P.49 (c) providing service of notice of the entry of an order or judgment by mail and consent that such notice may be served by electronic means. I am a member of the bar in good standing, or permitted by statute or Local Rule to appear without being a member of the bar. I understand that this electronic notice will be in lieu of notice by mail.

- * This CM/ECF system is for use only in cases designated by the US District Court for the Middle District of Alabama.
- * All attorneys who wish to practice in this court must register for Electronic Noticing (E-Service) per General Order 3164.
- * This system may be used by attorneys to file electronic documents. A Users login as issued by the court, combined with the password, serves as and constitutes the attorneys signature.
- * Attorneys must be members in good standing of the bar of this Court, or permitted by statute or Local Rule to appear without being a member of the bar, to file documents electronically.
- * CM/ECF. Users agree to abide by the rules and orders of this court and the Civil and/or Criminal Administrative Procedures (available on-line) concerning CM/ECF.

Application To Continue A Member Of Federal Bar In Good Standing

		PLEASE PRINT OF	TYPE	
Mr./Mrs./Ms.	Full First Name	Full Middle Name	Last Name	
	•	•	, where 9999 is the last four digits o	f the
social security n	umber) or other state b	ar number. <u>This is a REQUI</u>	RED FIELD	
Law Firm/Compa	any Name (if any)			
Mailing Address				
City/State/ZIP Co	ode			
,				
Business Teleph	none (Include Area Code	e) FAX Number (Inclu	de Area Code)	
Name When Init	ially Admitted To Practi	ce or any other names use	d (if different from above)	
Name As It Appe	ears On Pleadings (if di	fferent from above)		
	•		Service and E-filing	
Incl	udes Authorization to S	end Orders, Judgments, Pl	eadings and Other Documents by E	-Mail
Social Security N	Number (last four digits)	:		
(This information wil	l be maintained confidentially	and is necessary for security/co	nfirmation purposes)	
If you would like	to use the same ECF lo	ogin from another court, en	ter here	
Email Addresses	s (first listed will be prim	ary)		
I certify that I a	ım a member in good	standing of the Alabam	a State Bar.	
Date:	Signatu	re:		
DDI	NIT COMPLETE AN		ONC WITH THE \$50.00 DENE	14/41

PRINT, COMPLETE, AND MAIL THIS FORM ALONG WITH THE \$50.00 RENEWAL FEE MADE PAYABLE TO: