

2018 PRO BONO REPORTING FORM

1. I have been in practice and/or employed as an attorney for _____ years.

2. Firm size/description (check one):

- | | | |
|--|--|---|
| <input type="checkbox"/> Solo practice | <input type="checkbox"/> 20+ attorneys | <input type="checkbox"/> Retired |
| <input type="checkbox"/> 2 attorneys | <input type="checkbox"/> Government/public service | <input type="checkbox"/> Employed outside of the legal profession |
| <input type="checkbox"/> 3-5 attorneys | <input type="checkbox"/> In-house counsel (including non-profit) | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> 6-10 attorneys | <input type="checkbox"/> Educator | |
| <input type="checkbox"/> 11-15 attorneys | <input type="checkbox"/> Emeritus status | |
| <input type="checkbox"/> 16-20 attorneys | | |

Other (describe): _____

3. I have provided legal assistance WITHOUT EXPECTATION OF FEE to the following (this does not include those who employ you for pay):

Hours

- People of limited means referred by Montana Legal Services or one of its programs
- People of limited means referred through an organized local/state pro bono program
- A court-based program
- People of limited means self-referred/outside of an organized pro bono program
- Charitable organization(s) designed to assist people with limited means
- Religious organization(s) designed to assist people with limited means
- Community organization(s) designed to assist people with limited means
- Civic organization(s) designed to assist people with limited means
- Governmental organization(s) designed to assist people with limited means
- Educational organization(s) designed to assist people with limited means
- Organization(s) seeking to secure or protect civil or public rights and/or liberties

4. I have provided legal assistance at a SUBSTANTIALLY REDUCED FEE to the following (this does not include those who employ you for pay):

Hours

- People of limited means referred by Montana Legal Services or one of its programs
- People of limited means referred through an organized local/state pro bono program
- A court-based program
- People of limited means self-referred/outside of an organized pro bono program
- Charitable organization(s) designed to assist people with limited means
- Religious organization(s) designed to assist people with limited means
- Community organization(s) designed to assist people with limited means
- Civic organization(s) designed to assist people with limited means
- Governmental organization(s) designed to assist people with limited means
- Educational organization(s) designed to assist people with limited means
- Organization(s) seeking to secure or protect civil or public rights and/or liberties

5. In addition, I provided FREE or SUBSTANTIALLY REDUCED FEE legal services to charitable, religious, civic, community, governmental, or educational organizations in furtherance of their organizational purposes, where *payment of fees would greatly deplete their economic resources* (DO NOT duplicate hours entered in #3 and #4 above):

Hours

Free hours

Substantially reduced fee hours

6. My pro bono hours were provided in the following areas of practice (mark all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> ADR (all types) | <input type="checkbox"/> Education | <input type="checkbox"/> Landlord/tenant |
| <input type="checkbox"/> Adoption | <input type="checkbox"/> Employment/labor | <input type="checkbox"/> Military/veterans |
| <input type="checkbox"/> Bankruptcy | <input type="checkbox"/> Estate planning | <input type="checkbox"/> Non-profit |
| <input type="checkbox"/> Business | <input type="checkbox"/> End-of-life planning | <input type="checkbox"/> Probate |
| <input type="checkbox"/> Civil rights | <input type="checkbox"/> Family law | <input type="checkbox"/> Pro bono program administration/
coordination |
| <input type="checkbox"/> Conservatorship | <input type="checkbox"/> Guardianship | <input type="checkbox"/> Real estate/foreclosure |
| <input type="checkbox"/> Consumer law | <input type="checkbox"/> Health law | <input type="checkbox"/> Self-help support |
| <input type="checkbox"/> Criminal law | <input type="checkbox"/> Human rights | <input type="checkbox"/> Social Security |
| <input type="checkbox"/> Disability rights | <input type="checkbox"/> Immigration | <input type="checkbox"/> Tax |
| <input type="checkbox"/> Domestic violence | <input type="checkbox"/> Indian law | <input type="checkbox"/> Youth in need of care |
| <input type="checkbox"/> Elder law | <input type="checkbox"/> Insurance | |

Other (describe): _____

7. How would you rate your overall experience in providing pro bono services?

- | | |
|--|--|
| <input type="checkbox"/> Very positive | <input type="checkbox"/> Negative |
| <input type="checkbox"/> Positive | <input type="checkbox"/> Very negative |

8. Please tell us what would improve your ability to do pro bono work:

9. In addition, I also spent the following hours participating in volunteer activities for the purposes of improving the law, legal system, and/or legal profession:

Hours

CLE preparation/presentation

Committee/task force/commission/board

Presentations to organizations or institutions

Law school activities

Publications and/or articles

Educational materials

Access/equal justice program development

Elder legal document clinic

Other (describe): _____

10. I HAVE NOT provided pro bono legal services or other assistance since the last reporting period because:

- | | |
|--|--|
| <input type="checkbox"/> No reason | <input type="checkbox"/> Specific rule/regulation prohibits participation |
| <input type="checkbox"/> No opportunity given to me to provide pro bono services | <input type="checkbox"/> Only recently been admitted to the practice of law |
| <input type="checkbox"/> Lack of necessary skills/training | <input type="checkbox"/> Work outside the legal profession at this time |
| <input type="checkbox"/> Cannot afford to do pro bono work | <input type="checkbox"/> No longer practice law |
| <input type="checkbox"/> Do not have time to do pro bono work | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Employment/employer prohibits pro bono work | <input type="checkbox"/> Do not believe pro bono is my professional responsibility |
- Other (describe): _____

11. I am interested in doing pro bono work and would like further information about training and opportunities in my area:

- Yes
- No
- Area(s) of pro bono interest: _____

Today's Date: _____

Print Name: _____
(PLEASE TYPE OR WRITE LEGIBLY)

Firm: _____

Address: _____

City: _____ **ZIP:** _____
(REQUIRED)

Signature: _____

Mail this form by March 31, 2019 to:

**Patricia L. Fain
Statewide Pro Bono Coordinator
Montana Supreme Court
P.O. Box 21304
Billings, MT 59104-1304
406/794-7824 – pfain@mt.gov**