

**ATTORNEY'S NOTICE TO FINANCIAL INSTITUTION
TO ESTABLISH INDIVIDUAL NON-IOLTA TRUST ACCOUNT**

ATTORNEY INFORMATION

ATTORNEY INSTRUCTIONS: (1) COMPLETE THE "ATTORNEY INFORMATION" SECTION, (2) BRING THIS FORM TO THE FINANCIAL INSTITUTION OF YOUR CHOICE, (3) RETAIN A COPY OF THE EXECUTED FORM FOR YOUR OWN RECORDS.

Firm Name: _____

Attorney Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____ Telephone: _____

Account Title: _____

Account Type (such as individual account, master or umbrella account with subaccounts, guardianship, estate, or other type of trustee or fiduciary account): _____

The undersigned hereby open(s) an individual (non-IOLTA) interest-bearing trust account within the meaning of Mass. R. Prof. C. 1.15 and subject to the dishonored check notification provisions of said rule (e.g., accounts held as trustee, guardian, personal representative, or otherwise).

(Please [1] type or print and [2] sign)

Authorized Signatories: _____

FINANCIAL INSTITUTION INFORMATION

FINANCIAL INSTITUTION INSTRUCTIONS: (1) COMPLETE THE "FINANCIAL INSTITUTION INFORMATION" SECTION, (2) RETAIN THIS FORM WITH OTHER DOCUMENTATION FOR THIS ACCOUNT.

Financial Institution Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____ Telephone: _____

Date Account Opened: _____

Account Number: _____

The above account is an individual (non-IOLTA) interest-bearing trust account within the meaning of Mass. R. Prof. C. 1.15 and is subject to the dishonored check notification provisions of said rule and to the financial institution's signed agreement with the Board of Bar Overseers to report dishonored checks.

By: _____

(Financial Institution Representative)

THIS FORM IS FOR USE WITH INDIVIDUAL TRUST ACCOUNTS ONLY. FOR IOLTA ACCOUNT FORMS, SEE THE IOLTA GUIDELINES OR CONTACT THE IOLTA COMMITTEE, <http://www.maiolta.org/attorneys/index.html>