



The Commonwealth of Massachusetts

SUPREME JUDICIAL COURT

FOR SUFFOLK COUNTY
JOHN ADAMS COURTHOUSE
ONE PEMBERTON SQUARE, SUITE 1300
BOSTON, MASSACHUSETTS 02108-1707
www.sjccountyclerk.com

MAURA S. DOYLE
CLERK

CASE INFO (617) 557-1100
FACSIMILE (617) 557-1117

BAR INFO (617) 557-1050
FACSIMILE (617) 557-1055

IN RE: INSTRUCTIONS FOR OBTAINING A CERTIFIED COPY OF A PETITION FOR ADMISSION

To obtain a Certified Copy of a Petition for Admission, it will be necessary for you to comply with the procedure established by the Supreme Judicial Court.

You must complete the attached request. Kindly return the completed request and the **non-refundable** fee of \$10.00 (per copy of Petition) payable to the Commonwealth of Massachusetts (by check) to the below address:

**Clerk Maura S. Doyle
Supreme Judicial Court for Suffolk County
John Adams Courthouse, 1st Floor
One Pemberton Square – Suite 1300
Boston, MA 02108-1707**

Once this office receives the completed request and the required non-refundable fee, this office will process the request. The certified copy of the Petition should be issued within five (5) to ten (10) business days. However, depending on the location of the original case, the request for a certified copy could take longer to process.

Should you need further assistance, please do not hesitate to contact the Attorney Services Department 617-557-1050.

Very truly yours,

A handwritten signature in black ink that reads "Maura S. Doyle". The signature is fluid and cursive, with the first name being the most prominent.

Maura S. Doyle
Clerk
Supreme Judicial Court for Suffolk County

Commonwealth of Massachusetts

SUFFOLK, SS.

SUPREME JUDICIAL COURT

Request for Certified Copy of Petition for Admission

Attorney/Petitioner Name:

Last: _____ First: _____ Middle: _____

Mailing Address: (Delivery Address for the certified copy of the Petition(s))

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ Zip Ext.: _____

Contact for the Request (if different than the Petitioner/Attorney):

Name: _____

Full Address: _____
(i.e. Example Building, 123 Example ST., Ste., 1111; Pretend City, ST 02134)

Contact Number: _____ Email: _____

Has the Petitioner/Attorney ever been known by any other name? Yes: _____ No: _____
If yes, provide former name information:

Previous Last: _____ First: _____ Middle: _____

If applicable, when did the Petitioner/Attorney take the Massachusetts Bar? _____
(mm/dd/yyyy)

If applicable, what is the date of admission to the Massachusetts Bar? _____
(mm/dd/yyyy)

If applicable, what is the registered BBO Number? _____

Why are you requesting the certified copy of the Petition(s) for Admission?

(i.e. Admission to another jurisdiction, etc.)

Signed under the pains and penalties of perjury. Massachusetts General Laws, Chapter 268, section 1A*

Signed: _____

Dated: _____

No written statement required by law shall be required to be verified by oath or affirmation before a magistrate if it contains or is verified by a written declaration that is made under the penalties or perjury. Whoever signs and issues such a written statement containing or verified by such a written declaration shall be guilty of perjury and subject to the penalties thereof if such statement is willfully false in a material matter.