New Jersey Lawyers' Fund For Client Protection P.O. Box 961 Trenton, NJ 08625-0961

Certification of Retirement For The Calendar Year(s)

The retired exemption from payment is as defined, without alteration. We cannot grant the exemption if the language of this certification is altered or if "January 31" is deleted and a later date substituted.

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I,	, Esq., of full age, say:
1.	I am an attorney at law licensed to practice in the State of New Jersey;
2.	I hereby request exemption from payment to the New Jersey Lawyers' Fund for Client Protection for the calendar year indicated pursuant to <i>Rule</i> 1:28-2 because I am "retired completely from the practice of law" in every jurisdiction. I understand that attorneys are not exempt from payment solely by virtue of being out-of-state or exempt from <i>pro bono</i> assignment;
3.	The employment in which I engage is not in any way related to the practice of law. I do not draft or review, if any, legal documents, render advice on the law or legal assistance, teach law, or serve in a court system in any capacity, in any jurisdiction. This is an accurate description of my activities at least since January 31 of the year for which exemption is sought;
4.	I understand that I have an ongoing duty to immediately inform the Fund if I no longer qualify for the exemption granted;
5.	I understand that I will remain officially retired until I inform the Fund otherwise;
6.	I understand that it is my obligation to keep my address current with the Fund and respond to the Annual Attorney Registration Statement and <i>Pro Bono</i> Assignment Questionnaire.
	Ty that the foregoing statements made by me are true. I am aware that if any of the ing statements made by me are willfully false, I am subject to punishment.
Date:	Signature:

Revised: 05/2018, CN: 11620 page 1 of 1