



Office of Regulation Counsel

SUPREME COURT OF GUAM



GUAM JUDICIAL CENTER

120 WEST O'BRIEN DRIVE, HAGĀTÑA, GUAM 96910

OFFICE: (671) 475-3167 | EMAIL: REGULATIONCOUNSEL@GUAMCOURTS.GOV

REQUEST FOR ASSISTANCE

- Use this Request for Assistance form for help with a communication or client file issue between you and a lawyer instead of filing a Complaint Against An Attorney form. Email the completed Request for Assistance form to regulationcounsel@guamcourts.gov. We will try to contact the lawyer and ask the lawyer to resolve your concerns.
- We try to respond within a reasonable time. Do not wait to take any other actions related to your case. There are time deadlines for civil and criminal cases.
- We cannot give legal advice, represent you, or refer you to a lawyer.

INFORMATION ABOUT YOU

Name _____
 Street Address or P.O. Box _____
 City _____ State _____ Zip Code _____
 Phone Number _____
 Email Address _____

INFORMATION ABOUT THE LAWYER

Name _____ License Number _____
 Street Address or P.O. Box _____
 City _____ State _____ Zip Code _____

NATURE OF DISPUTE: <input type="checkbox"/> Communication <input type="checkbox"/> Return client file <input type="checkbox"/> Request billing statement	Is this your lawyer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Former Lawyer
	Have you already tried to contact this lawyer about your concerns? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Type of legal matter: _____ (For example, civil, criminal, domestic, child custody, etc.)

I understand that this is an informal request for assistance to resolve an issue. I confirm that I am the person identified above, I did not file a complaint against this lawyer, and this form is not a complaint against the lawyer.

Date _____ Signature _____