

**2019 REGISTRATION OF ATTORNEYS OF SEDGWICK COUNTY, KANSAS**

The Sedgwick County Law Library registration fee is \$100.00 as fixed by the board of trustees. Pursuant to K.S.A. 20-3126, please complete the items in detail and return to the address listed below with your registration fee. **Checks payable to: Clerk of the District Court**

CLERK OF THE DISTRICT COURT  
ATTN: ATTORNEY REGISTRATION  
ADMINISTRATIVE OFFICE  
525 N MAIN, 11<sup>th</sup> FLOOR  
WICHITA, KS 67203

**REGISTRATION TO BE COMPLETED ON OR BEFORE JANUARY 15<sup>th</sup>, 2019**

Attorney Name: \_\_\_\_\_  
(First) (Middle) (Last) (Suffix)

Date of Birth: \_\_\_\_\_ Last 4 Digits of Social Security #: ### - ## -

Place of Residence: \_\_\_\_\_  
(Street) (Apt. No.)  
\_\_\_\_\_  
(City) (State) (Zip)

Law Firm Name: \_\_\_\_\_

Office Location: \_\_\_\_\_  
(Street) (Suite) (PO Box)  
\_\_\_\_\_  
(City) (State) (Zip)

Office Phone: ( ) \_\_\_\_\_ Office Fax: ( ) \_\_\_\_\_

Other Phone: ( ) \_\_\_\_\_ Other Fax: ( ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Bar Number: \_\_\_\_\_ Are you currently a Prosecutor?  YES  NO

Date of Admission to practice law in Kansas: \_\_\_\_\_

Date of Admission to practice law in any other State: \_\_\_\_\_

And what State: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only	
Date Received:	_____
Date Entered:	_____
Entered By:	_____

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