UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF TEXAS

REQUEST FOR CERTIFICATE OF GOOD STANDING

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1. Please provide the information requested below.

2. Include a Self Addressed Stamped Envelope.

3. Send your request along with a check in the amount of $19.00 made payable to "U.S. District Clerk" to the following address:

Clerk, US District Court
ATTN: Attorney Admissions Clerk
300 Willow, Room 104
Beaumont, Texas 77701

_____
LAST NAME *FIRST NAME* *MIDDLE/MAIDEN NAME*

_____
ADDRESS *CITY* *STATE* *ZIP CODE*

BAR NO._____

DATE OF ADMISSION TO EASTERN DISTRICT OF TEXAS. _____

PHONE NUMBER._____