Supervision of Lawyer Referral Service referred Cases within a Law Firm

I, ­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby acknowledge that I am a member of the ACBA Lawyer Referral Service.  As a member, I agree to ensure that any ACBA LRS referred case taken for representation by me will be pursued/prosecuted to the level of competency and care consistent with my skill and professional knowledge.

Signature/Date