

ECF FILING EXEMPTION FORM

I am counsel of record for _____ in the following appeal or appeals (Case Numbers and Captions):

I hereby request an exemption from the court's requirement that all attorneys participate in the ECF filing system. The basis for my request is:

_____ Name

_____ Address

_____ Phone Number

_____ Fax Number

Action (Approved or Denied) _____ Date: _____

Leonard Green, Clerk