



Avis E. Buchanan
Director

Rudolph Acree, Jr.
Deputy Director

OFFICE OF REHABILITATION & DEVELOPMENT REFERRAL
ADULT CONFLICT CHECK

I have completed a review of court records and have inquired of my client, and to my knowledge, the referring client is not a co-defendant of or a witness against a Public Defender Service client. In addition, this client is not suing a Public Defender Service staff member and has not filed ineffective assistance charges against a present Public Defender Service attorney.

If at any time during the case, I become aware of a conflict, I will notify Special Counsel to the Director, Teresa Roth, of the Public Defender Service.

I certify that the above information is true and accurate to the best of my knowledge.

Conflict Check on:

Mr./Ms/Mrs. _____

PDID: _____ **Case#(s)** _____

Defendant(s), PDID#s; Defense Attorneys: _____

Referring Attorney's Name _____ **Bar#** _____

Address _____ **City/State** _____

Attorney Signature _____ **Date** _____