SOUTH CAROLINA BAR PRO BONO PROGRAM
DIRECT INTAKE FORM

One of the purposes of the South Carolina Bar Pro Bono Program is to maintain a record of all *pro bono* civil and criminal work, including court appointments, by Bar members. Your legal work is classified as "pro bono" if your client is indigent and you are not compensated for your legal work. Reimbursement by the Office of Indigent Defense is an exception to the non-compensation rule. Please use this form to inform the Pro Bono Program of your *pro bono* legal work. Do not use this form for cases referred to you by the Pro Bono Program.

The Pro Bono Program offers malpractice insurance coverage at no cost to you. This coverage is effective as of the date of the receipt of this form by the Pro Bono Program. **Clients are not considered indigent unless they meet the income guidelines for the Pro Bono Program or court appointment.**

Attorney Name: _____

Attorney Address: _____

Client Name: _____

Client Address: _____

Client Telephone Number: _____

Check one of the following:

☐ **Court Appointment (attach court order)**
☐ **Walk-In** (voluntary representation)

Case Type: _____ **Venue:** _____

Date representation started: _____

"THIS CLIENT IS INDIGENT AND I WILL NOT BE COMPENSATED FOR MY LEGAL WORK ON THIS CASE OTHER THAN AS PROVIDED BY THE OFFICE OF INDIGENT DEFENSE."

_____
(Attorney's Signature)

Please fax this form to (803) 799-5290, or mail the form to: South Carolina Bar Pro Bono Program, P.O. Box 608, Columbia, SC 29202.

(Upon receipt of this form, the Pro Bono Program will forward a closure form to you to account for case completion.)