

## LAW FIRM CERTIFICATE OF ACCOUNTS

**Firm Name:**

**Street Address:**

**City/Town:**

**State:**

**Zip Code:**

Pursuant to SCRs 20:1.15(i)(2) and (k)(11), the undersigned certify/certifies that the above-referenced firm maintains trust account(s), fiduciary account(s), and/or safe deposit box(es) in which funds or property belonging to clients or third parties is held in trust. The location of each account and/or safe deposit box and the total number of each type of account at that location are identified below and/or on a separate list attached to this Certificate.

| Name of Financial Institution | Street Address of Financial Institution | Account Type |      |     |
|-------------------------------|---|--------------|------|-----|
|                               |   | Trust        | Fid. | Box |
|                               | Street Address                          |              |      |     |
|                               | Telephone Number                        |              |      |     |
|                               | Street Address                          |              |      |     |
|                               | Telephone Number                        |              |      |     |
|                               | Street Address                          |              |      |     |
|                               | Telephone Number                        |              |      |     |
|                               | Street Address                          |              |      |     |
|                               | Telephone Number                        |              |      |     |

A list of the locations of additional trust accounts, fiduciary accounts and/or safe deposit boxes is attached.

\_\_\_\_\_  
Name of Partner/Member Responsible  
for Trust/Fiduciary Account

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Name of Partner/Member Responsible  
for Trust/Fiduciary Account

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

# LAW FIRM CERTIFICATE OF ACCOUNTS INSTRUCTIONS

**Filing Requirements:** SCR 20:1.15(i)(1) requires lawyers to certify the name, address, and telephone number of each financial institution in which the lawyer/law firm maintains a trust account, a fiduciary account, or a safe deposit box. Pursuant to SCR 20:1.15(i)(2), a law firm must file a Certificate of Accounts on behalf of the lawyers in the firm who are required to file a certificate under SCR 20:1.15(i)(1).

Each lawyer who signs the Certificate of Accounts as the partner/member responsible for management of the firm's trust/fiduciary account(s) must also make the required acknowledgments on his/her own dues statement.

**When to File:** A Certificate of Accounts must be filed annually in conjunction with the filing of State Bar Dues Statements. The list must include the names of all financial institutions at which accounts are maintained by the firm as of the date of the filing of the Certificate. Trust accounts, fiduciary accounts, and safe deposit boxes opened after filing a Certificate of Accounts must be reported to the State Bar on the following year's Certificate.

**Where to File:** A Certificate of Accounts should be mailed or sent by email to:

State Bar of Wisconsin  
P.O. Box 14290  
Madison, WI 53708-0290  
Email: [service@wisbar.com](mailto:service@wisbar.com)

## Identification of Financial Institution and Type of Account:

Under SCR 20:1.15(i)(1) and (2) (*effective July 1, 2023*), for each trust account, fiduciary account, or safe deposit box maintained by a lawyer or law firm, the lawyer or law firm must certify the name of the institution, its street address, including the city, town or municipality in which the lawyer/law firm does its banking, and its telephone number. Do not provide the address of the financial institution's main office or corporate headquarters as the location of the account(s). If the firm maintains accounts at more than four financial institutions, please attach a separate list to the Certificate of Accounts, and check the box specifying that a list is attached. Finally, please identify the accounts at each financial institution as either a trust account, a fiduciary account, or a safe deposit box by checking the appropriate box(es) under the Account Type column.

**Penalty for Non-compliance:** Pursuant to SCR 20:1.15(i)(4) and (k)(11), failure to file the Certificate of Accounts is grounds for automatic suspension from the practice of law in the same manner as for nonpayment of dues.

**For further information,** contact the OLR Trust Account Program at:

Email: [olr.trustaccount@wicourts.gov](mailto:olr.trustaccount@wicourts.gov)

Website: <https://www.wicourts.gov/services/attorney/trust.htm>