The West Virginia State Bar

Annual Membership Fees and Reporting 2013-14

The instructions below are for State Bar members that have a firm administrator that will be entering their IOLTA and FRD information on their behalf.

Instructions:

 Log in using your email address and password at <u>www.mywvbar.org/2013</u> (If you do not have a password select request a password and it will be emailed to you).

Jsername or	e-mail *	
mike		
Password *		
•••••		
Reques	st new passwo	ord
Log in		

- 2. Update your address and contact information if needed
- 3. Under the "Firm Name" field type in the name of your firm to search for your organization. (If your organization does not show up in the firm name search, enter it in the Other Organization field below.)

earch for your firm name below by typing in the organization name. Select your name rom the drop down list. If your firm / organization is not on the search results fill out the Other Organization (Not Listed Above) field below.			
Firm Name Sea	rch		
- Search Abo	ve For Your Employer Name -		
inter the organiza	tion name if it does not appear in the list above.		
ob Title			

4. Choose "Yes" for your firm administrator to complete your FRD select Yes the firm administrator radio button.)

Financial Responsibility Disclosure Information
This section contains the information required to be filed annually by all active West Virginia Bar Members. For those attorneys whose firm collects and supplies FRD information, check the box to indicate that the information will be supplied by the attorney's firm.
FRD Exemption Yes No Are you exempt from the provisions of this Rule because you are engaged in the practice of law as a full-time government lawyer or in-house counsel and do not represent clients outside that capacity?
Firm Administrator Yes O No Will your Financial Responsibility Disclosure be made by your firm administrator? (Pursuant to the Bar's By-Laws, you will be charged \$25,0000 your num administrator does not complete and submit this information before September 1, of this fiscal year.)
Insurance Provider Name
Insurance Provider Address
Insurance Policy Number

- 5. Select whether you are exempt or not from Rule 1.15.
- 6. Choose "Yes" to have your firm administrator complete your IOLTA compliance information for you.

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OLTA Exemption Yes	No.	
e you exempt from the provisions of Ru	e 1.12 to december - emplois non un requirement see nue 1.12 on une vest singina nues on rocessional contude, and the operating requirement set in operating requirements of the requirement set of the set of th	
Firm Administrator - IOLTA	fes ⊚ No by wour firm administration	
Account Existence	No	
on you currently have an IOLTA Account to ompliance with Rule 1.15)	hat you use for clients funds? (An interest or dividend-bearing trust account for nominal or short-term client deposits, with interest or dividends that are payable to The West Virgini	ia State Ba
ax ID Number (FEIN#)		
rovide the FEIN # for the IOLTA Account	nformation.	
scount Nama		
The name on the IOLTA Bank Account.		
Bank Name		
lame of the bank where the IOLTA accou	it is located.	
rust Account Number		
rust Account number of the IOLTA accou	nt	
Bank Routing Number		
Bank routing number of the IOLTA accour	t	
Additional Accounts		

7. Click on the "submit" button at the bottom of the form

Submit 2013-14 Annual Membership Report Information

8. Choose your membership type



9. Select "I will send payment by check"

Payment Ontions						
rayment options						
Payment Method *	Pay by Credit Card I will send payment by check					