



THE LEGAL PROFESSION ACT
Legal Profession (Annual Declaration of Activities) Regulations, 2014

ANNUAL DECLARATION OF ACTIVITIES

To be filed in respect of each calendar year on or before the 31st January of the next calendar year

Pursuant to Section 5(3C) of the Legal Profession Act

Reporting Year*: _____

Are you completing this form for more than one attorney?*: _____

Part 1 – Basic Information for Attorney(s)/Firm

1. Name*: _____ Attorney or Firm?*: _____
2. Please indicate the structure of your practice*:
Sole Practitioner Partnership Other _____
Structure of Practice
3. Business Address*: _____
Apt, Suite, Building No., Street Address Town* Code Parish*
4. Contact details:
_____ *Telephone Nos.* _____ *Fax* _____ *Email**
5. Number of premises/locations from which the Attorney/Firm operates*: _____
6. Address & Contact details for other locations: *Entry below is enabled if number of premises is greater than 1. If space provided is inadequate, attach list [in Excel format](#) with the same address and contact fields.*

Business Address: _____ <i>Apt, Suite, Building No., Street Address</i> _____ <i>Town</i> _____ <i>Code</i> _____ <i>Parish</i>
_____ <i>Telephone Nos.</i> _____ <i>Fax</i> _____ <i>email</i>
Business Address: _____ <i>Apt, Suite, Building No., Street Address</i> _____ <i>Town</i> _____ <i>Code</i> _____ <i>Parish</i>
_____ <i>Telephone Nos.</i> _____ <i>Fax</i> _____ <i>email</i>
Business Address: _____ <i>Apt, Suite, Building No., Street Address</i> _____ <i>Town</i> _____ <i>Code</i> _____ <i>Parish</i>
_____ <i>Telephone Nos.</i> _____ <i>Fax</i> _____ <i>email</i>

