



OFFICE OF THE CLERK
Supreme Court of Arkansas
Arkansas Court of Appeals

RULE XIV. PRACTICE BY COMITY PRO HAC VICE **APPEARANCE INFORMATION AND PAYMENT FORM** **INSTRUCTIONS**

The Rule XIV. Practice by Comity pro hac vice Appearance Information and Payment Form and the information contained herein are intended for processing and issuing proof of payment to the non-resident attorney requesting permission to participate in court proceedings in the state of Arkansas.

Requirements and Information

- Completed *Rule XIV. Practice by Comity pro hac vice Appearance Information and Payment Form*
- Required fee of \$200 made payable to the Bar of Arkansas
- Self-addressed stamped envelope or email address for the return of the proof of payment

The form and payment can be submitted online at: <https://ar.gov/prohacpay>

User credentials are not required to use the safe and secure online payment portal. Note: If paying online by e-Check, the payment processor will automatically apply a \$2 service fee. The service fee for paying with a credit/debit card is 3% + \$1.

According to Rule XIV(b) of the Rules Governing Admission to the Bar, a non-resident attorney requesting permission to participate in proceedings in a court in this State shall pay a fee of \$200 for each case in which the attorney is requesting to participate. Except as otherwise provided by Rule XIV, the non-resident attorney fee is a mandatory initial requirement.

Instructions for Completing the Form

Non-Resident Attorney Information

Provide the name, contact information, and a list of jurisdictions in which the non-resident attorney is licensed. If applicable, list bar numbers issued by the jurisdictions.

Case Information for Which You Seek Admission

Provide the name of the county and district (for those counties with two county seats), or the appellate court in which the non-resident attorney is wishing to appear pro hac vice. If the docket number is not yet assigned or known during the completion of this form, enter "to be determined."

Sponsoring Attorney Information

Provide the name and Arkansas Bar ID number of the attorney licensed in Arkansas with whom the non-resident attorney will be associated in the Arkansas proceedings.

Non-Resident Attorney Compliance with Rule

It is the responsibility of the non-resident attorney to read Rule XIV of the Rules Governing Admission to the Bar and adhere to it accordingly.



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PRO HAC VICE APPEARANCE INFORMATION AND PAYMENT FORM

Date Submitted: _____

Non-Resident Attorney Information

Attorney Name _____

Address _____

City, State _____ Zip Code _____

Phone Number _____

Email Address _____

Jurisdiction(s) and Bar Number(s) _____

Case Information for Which Non-Resident Attorney Seeks Admission

Court _____

Docket Number _____

Case Name _____

Sponsoring Attorney Information

Attorney Name _____ Arkansas Bar Number _____

Official Proof of Payment from Clerk's Office Issuance

Please email proof of payment to the following email address(es):

Please return proof of payment in the enclosed self-addressed stamped envelope.

For Clerk's Office Use Only

Receipt Number _____ Date Entered _____ Entered By _____

Payment Type _____ Number _____ ID Number _____