INSTRUCTION SHEET FOR COMPLETION OF FORM DB-21

Complete the Caption:

1. Insert the respondent's full registration name. Official registration name is available at www.padboard.org under the "Look Up An Attorney" Link on the home page.

2. Insert Supreme Court Disciplinary Docket number(s) (if any), and Disciplinary Board docket number(s) (if any). Otherwise, identify all ODC File numbers. Caveat: In some instances, several ODC File numbers may be subsumed under one Disciplinary Board docket number, and it may be necessary to identify that docket number ***and*** the remaining ODC files to which a Board docket number has not been assigned. **Only complaint matters and proceedings identified in the caption will be held in abeyance.** For assistance in identifying pending matters, contact the assigned disciplinary counsel.

3. Insert the respondent's attorney registration number.

4. Insert county of registration unless principal office for the practice of law is in another county within the Commonwealth. If the respondent's practice of law is located outside the Commonwealth, or the respondent is not engaged in practice and resides outside the Commonwealth, insert "Out of State" within the parentheses.

Complete ALL averments in the body of the Certificate. Delete inapplicable material when presented with a choice.

Averment 1. Indicate how the respondent became aware of proceedings. (E.g., "by DB-7 Letter dated November 2, 2010, at ODC File Nos. C1-10-17 and C1-10-225"; "by petition for discipline docketed at No. 77 DB 2010."

Averment 2. Identify the "precise nature" of the disability or disabilities, as required by Pa.R.D.E. 301(e)(1).

Averment 3. Identify the specific or approximate date of the onset or initial diagnosis of the disabling condition, as required by Pa.R.D.E. 301(e)(1).

Averment 5. Provide an explanation of the manner in which the disabling condition makes it impossible to prepare an adequate defense, as required by Pa.R.D.E. 301(e)(2). Attach additional pages if necessary.

Averment 6. Identify at least one medical expert, and attach at least one medical opinion, as required by Pa.R.D.E. 301(e)(3).

Averment 7. Indicate whether the Certificate will contain additional attachments. Identify all additional attachments.

***Filing Instructions*:**

Pa.R.D.E. 301(e) requires that the respondent file the Certificate with the Board Prothonotary and serve a copy of the Certificate on Disciplinary Counsel, as follows:

1. File the Certificate with the Board Prothonotary using the Disciplinary Board's Attorney Gateway (https://www.padisciplinaryboard.org/attorney-gateway). If filing by mail, send an unbound copy to:

   Board Prothonotary
   Disciplinary Board of the Supreme Court of Pennsylvania
   601 Commonwealth Avenue, Suite 5600
   P.O. Box 62625
   Harrisburg, PA 17106-2625

2. Send one bound copy to:

   Chief Disciplinary Counsel
   Disciplinary Board of the Supreme Court of Pennsylvania
   601 Commonwealth Avenue, Suite 2700
   P.O. Box 62485
   Harrisburg, PA 17106-2485

3. Send one bound copy to the assigned Disciplinary Counsel in the appropriate disciplinary district office. Please refer to the office addresses listed below for the approprite district office:

   District I Office of Disciplinary Counsel
   1601 Market Street, Suite 3320
   Philadelphia, PA 19103

   District II Office of Disciplinary Counsel
   820 Adams Avenue, Suite 170
   Trooper, PA 19403

   District III Office of Disciplinary Counsel
   601 Commonwealth Avenue, Ste. 5800
   PO Box 62675
   Harrisburg, PA 17106

   District IV Office of Disciplinary Counsel
   Frick Building, Suite 1300
   437 Grant Street
   Pittsburgh, PA 15219

Form DB-21 (See Separate Instructions for Completion of Form)
(5/2025)

CERTIFICATE OF ADMISSION OF DISABILITY BY ATTORNEY

IN THE SUPREME COURT OF PENNSYLVANIA

OFFICE OF DISCIPLINARY COUNSEL,	:	No.
Petitioner	:	
	:	
	:	
v.	:	
	:	Attorney Registration No. _____
	:	
Respondent	:	(County)

Pursuant to 301(e), Pennsylvania Rules of Disciplinary Enforcement (Pa.R.D.E.), I, _____, do hereby aver as follows:

1. I am aware of current disciplinary proceedings involving allegations or charges of professional misconduct made known to me by _____

_____

_____

2. In regard to the disciplinary proceedings identified in paragraph 1, *supra*, I am suffering from a disability by reason of _____

_____

_____

3. The **[specific][approximate]** date of the **[onset][initial diagnosis]** of the disabling condition was _____.

4. The disabling condition makes it impossible for me to prepare an adequate defense to the allegations or charges of professional misconduct.

5. The manner in which the disabling condition makes it impossible for me to prepare an adequate defense is as follows:

_____

_____

_____

_____

6. I have appended hereto the opinion of the following medical expert (or experts) that I am unable to prepare an adequate defense, which opinion includes a statement containing the basis for the medical expert's opinion (or medical experts' opinions):

_____

_____

7. I am aware that I may attach affidavits, medical records, additional medical expert reports, official records, or other documents in support of the existence of the disabling condition or my contention of lack of physical or mental capacity to prepare an adequate defense.

I am attaching the following documents:

_____

_____

_____

8. I am aware of the provisions of Pa.R.D.E. 301(e) as to immediate prospective action by the Supreme Court of Pennsylvania to transfer me to inactive status because of my assertions herein and in the attachments unless: a) the Supreme Court finds that my certificate does not comply with the requirements of Pa.R.D.E. 301(e); or b) upon application by Disciplinary Counsel and for good cause shown, the Supreme Court takes or directs such action as the Court deems necessary or proper to a determination of whether it is impossible for me to prepare an adequate defense.

9. Based on my knowledge or information and belief, all averments of material fact contained in this certificate and attachments are true, and I make this averment subject to the penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities.

_____ _____

Date Respondent

_____ _____

Date Counsel for Respondent

cc: (with attachments)
_____, Chief Disciplinary Counsel
_____, Disciplinary Board Prothonotary
_____, Disciplinary Counsel, District __