

## Notice:

Claimant is required to agree to cooperate in all efforts that the CPF Commission undertakes to achieve restitution for the Fund.

Claimant is required to repay the Fund if claimant is subsequently reimbursed from another source

Neither the State Bar of New Mexico nor the Client Protection Fund Commission have any responsibility for the acts of individual lawyers in their practice of law.

All reimbursements of losses by the Client Protection Fund are in the sole discretion of the Client Protection Fund Commission.

No person shall have any legal right to reimbursement from the fund. No person shall have any right in the Client Protection Fund as a third party beneficiary or otherwise. The decision of the Commission is final.



STATE BAR  
of NEW MEXICO

### Client Protection Fund

5121 Masthead NE, Albuquerque, NM 87109  
PO Box 92860, Albuquerque, NM 87199  
(505) 797-6068 | Fax (505) 797-6019  
[www.nmbar.org](http://www.nmbar.org)



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# CLIENT PROTECTION FUND

## Purpose

The purpose of the New Mexico Client Protection Fund is to promote public confidence in the administration of justice and the integrity of the legal profession by reimbursing losses caused by the dishonest conduct of lawyers admitted and licensed to practice law in the courts of New Mexico.

## Eligible Claims

1. The loss must be caused by the dishonest conduct of the lawyer and shall arise out of and by reason of a client-lawyer relationship or a fiduciary relationship between the lawyer and the claimant.
2. The claim shall be filed no later than five (5) years after the claimant knew or should have known of the dishonest conduct.
3. Other requirements may apply and not all losses are reimbursable.

## How to File a Claim

1. Call CPF program at (505) 797-6068 or 1-800-876-6227 and request a Claim Form.
2. Fill out the Claim Form completely.
3. Provide CPF program with copies of any checks, money orders, receipts or other proofs of payment.
4. Include any other relevant documents such as:
  - Retainer or Fee Agreement with attorney;
  - Receipts or billings from attorney reflecting payments and charges; and
  - Court name, mailing address, name of parties to the action, court file number, and name of presiding judge relative to your matter.
5. Claim Form must be signed and notarized.
6. Signed/notarized claim form must be returned to the State Bar's CPF.
6. Maximum amount of a claim is \$10,000.

## Claim Process

- CPF receives completed Claim Form;
- Lawyer is notified of the claim and given an opportunity to respond;
- Claim is assigned to either the CPF Administrator or a Commissioner for investigation;
- Recommendations by the CPF Administrator or a Commissioner are made to the CPF Commission at a scheduled meeting;
- Claim is approved or denied;
- Claimant and attorney are notified of the CPF decision;
- Claimant or attorney may request reconsideration in writing within thirty days of the denial of claim;
- Claimant provides the Fund with a transfer of claimants rights against the lawyer by signing and notarizing a Release and Subrogation Form;
- Approved restitution claims are processed and the Claimant is mailed a check via certified mail; and
- After payment of a claim, the Commission may publicize the nature of the claim, the amount of reimbursement and the name of the lawyer.