FOR OFFICIAL USE ONLY

STATE BAR OF NEVADA

Member Services P.O. Box 50 • Las Vegas, NV 89125-0050 (702) 317-1430 • suzannew@nvbar.org



Voluntary Request for SCR 98.7 Transfer to Active Status

Bar No.:	Member Name:	
Phone Number:	E-mail:	
• •	e enrolled as an ACTIVE member of the State Bar of Nevada in accorda Status change will be effective upon receipequired disclosures.	
•	on fee and the full annual membership fee for an active member, for the paid as an inactive member for such year is required.	current calendar
_	ctive dues and have been licensed five years or more in any jurisdiction plus \$1, i.e. $$450 - $125 = $325 + $1 = 326 or less than five years in any jurisdiction $$126 = 126	
☐ Enclosed is my chec	k, payable to the State Bar of Nevada, for ACTIVE Membership fees.	
•	account reporting form (Certification of Compliance and Consent) avaivbar.org. THIS IS REQUIRED PRIOR TO STATUS CHANGE TAKIN	-
•	rance disclosure – required only if the information has changed since yo ibrary of forms page at www.nvbar.org .	ur most recent
•	cessary) my contact information by logging in to my account online and password information are provided at login, www.nvbar.org (top right of	_
Signature	Date	