



Pro Bono Referral Case Status Report

Attorney Name: _____

Client Name: _____ **Heartland File#:** _____

Case is: Open Closed on _____ **Engagement letter signed?** Yes No

2018 Pro bono hours: _____ **2019 Pro bono hours** (ONLY if closed after 12/31/2018): _____

Service(s) provided:

- None
- Counsel & Advice only
- Brief service / unbundled services
- Settlement without litigation
- Settlement with Litigation
- Court order
- Administrative hearing
- Other: _____

Attorney Fees: None Yes, from other party Yes, from client
 Amount of fees: \$ _____ Ordered only; not received

Expenses: None Yes, paid by client Yes, paid by attorney. Amount: \$ _____

If closed, why was it closed?

- Matter was resolved.
- Client did not contact
- Client no-show for appointment
- Client failed to cooperate
- Terminated by client
- No merit; did not proceed
- Client not eligible
- Other: _____

If closed, have you withdrawn your appearance? Yes Not yet, but I will N/A

Additional comments, concerns, or questions about this referral:

Are you willing to accept another case from Heartland?

- Yes!
- Not right now, call me after _____
- No, thank you.

Attorney Signature

Date

Please return to
Mail:

Heartland Pro Bono Council, Inc.
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Indianapolis, IN 46204
(317) 829-3173 OR (317) 631-9775, Attn. Heartland
HeartlandPBC@gmail.com

Fax:
Email: