**File Closing Form - Internal Process**

Client Name: File No.:

File Title: Matter Code:

Responsible Attorney(s): \_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_ Closing Date:

Attorney Responsible for Final File Closing Review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Materials Returned to Client Date / Means of Return

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/

Materials to be Retained

Materials to be Destroyed

Date File Closing Letter Sent to Client: \_\_\_\_\_\_\_\_\_\_\_

Date Signed Acknowledgement Letter Re Returned Materials Received from Client: \_\_\_\_\_\_\_\_\_\_\_

Comments/Notes:

NOTE: This material is intended as only an example, which you may use in developing your own form. It is not considered legal advice and as always, you will need to do your own research to make your own conclusions with regard to the laws and ethical opinions of your jurisdiction. In no event will ISBA Mutual Insurance Company be liable for any direct, indirect, or consequential damages resulting from the use of this material.