



PLEASE COMPLETE & RETURN THIS
FORM TO Tami Knoll by
March 1, 2024
tami.knoll@texasbar.com
512.427.6850

STATE BAR of TEXAS

DISTRICT DIRECTOR INFORMATION

YOUR NAME: _____ Date: _____
(Print your name as how you would like it appear on SBOT materials)

OFFICE ADDRESS

Firm Name: _____

Firm Address: _____

PO Box #: _____

City: _____ Zip: _____

Tel.#: (____) _____ Fax #: (____) _____

Email: _____

ASSISTANT'S Name: _____ Tel.# (____) _____

Email: _____

Please include:

1. 200 word bio
2. Recent photo of yourself

This info is for internal purposes only and will not be distributed

SPOUSE'S NAME: _____

HOME ADDRESS: _____

City: _____ Zip: _____

Tel.#: (____) _____