

**UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF LOUISIANA
CM/ECF ON-LINE TRAINING
CERTIFICATE OF COMPLETION**

The United States District Court, Eastern District of Louisiana requires that an attorney attend a training class before receiving a login and password to electronically file in this court. As an alternative to attending the classes provided at the courthouse, an attorney may choose to complete the Eastern District of Louisiana's on-line tutorial which can be found at www.laed.uscourts.gov.

If you have completed the tutorial, please sign and return to the court the Certificate of Completion and the CM/ECF Registration Form. These forms are located below and can also be found on the court's website. Upon receipt of the certificate and registration form, the Clerk of Court's Office will contact the attorney by e-mail within 72 hours with the secure login and password needed to access the live CM/ECF system.

Please type or print:

I, _____, hereby certify that I have personally completed the CM/ECF on-line tutorial, for the Eastern District of Louisiana, on the date of_____.

I further certify that I understand how to use the CM/ECF system and that I have read all court rules and procedures regarding CM/ECF. I authorize the Clerk's Office to contact me by telephone, mail or email to inform me of my login and password.

Signature

Date

LA Bar Number

Please send to: Clerk's Office, at 500 Poydras Street, Room C-151, New Orleans, LA 70130 or by fax to (504) 589-7697.

**United States District Court
Eastern District of Louisiana
ELECTRONIC CASE FILING SYSTEM
Attorney Registration Form**

This form shall be used to register for an account on the Eastern District of Louisiana's Electronic Filing System. Registered attorneys will have privileges to electronically submit documents and to view and retrieve electronic docket sheets and documents as available for cases assigned to the Electronic Filing systems. The following information is required for registration:

Please Type

First/Middle/Last Name: _____

Attorney Bar # and State: _____

Firm Name: _____

Firm Address: _____

Telephone Number: _____

FAX number: _____

E-Mail
Address: _____
(Attorney's email for electronic service)

Additional E-Mail Address: _____
(Secretary, central repository, etc.)

****Note: Attorneys seeking to file documents electronically must first be admitted to practice in the United States District Court, Eastern District of Louisiana pursuant to LR83.2.3E or 83.2.6E. Attorneys filing only in MDL cases are not required to be admitted to practice in this court.**

****By submitting this registration form, the undersigned agrees to abide by all Court rules, orders and policies and procedures governing the use of the electronic filing system. The undersigned also consents to receiving notice of filings pursuant to Fed.R.Civ.P. 5(b) and 77(d) via the Court's electronic filing system and consents to receive service from other filing users by the Notice of Electronic Filing generated by the Court's electronic filing system. The combination of user id and password will serve as the signature of the attorney filing the documents. Attorneys must protect the security of their passwords and immediately notify the court if they learn that their password has been compromised.**

Date

Attorney/Participant Signature