CHECKLIST FOR CLOSING FILES

Date Started: ______________________________
File No.: ________________________________
Client: _________________________________
Matter: _________________________________
Close File No.: ____________________________
Attorney: ________________________________
Initials: _________________________________

Responsible	**Initials**	**Date**	**Action**
Receptionist	_______	_______	Notify accounting that file is to be closed.
Secretary	_______	_______	Check file for unfinished business, unpaid cost bills, etc.
Secretary	_______	_______	Prep for permanent storage: strip file of duplicate copies and legal pads, paper clips; remove staples, give research materials to law clerk for filing.
Secretary	_______	_______	Create record or index card for any out of state attorney, expert witness, etc. in research file.
Attorney	_______	_______	Send client Questionnaire if appropriate.
Attorney	_______	_______	Notify secretary if any forms or letters created during matter should be retained for general use instead of archived or deleted.
Attorney	_______	_______	Mark any documents that should be returned to client.

Attorney	________	________	Mark any documents that must be permanently preserved.

Responsible	**Initials**	**Date**	**Action**
Attorney	________	________	Mark file destroy date, if applicable.
Secretary	________	________	Delete or archive documents that will not be retained as active.
Accounting	________	________	Prepare final pre-bill/bill, if applicable.
Accounting	________	________	Zero out Trust Accounting Ledger for client matter.
Accounting	________	________	Mark OK to close if all categories are zero. Give file to receptionist.
Receptionist	________	________	Put matter in closed status. Transfer file to file room/clerk.
File Clerk	________	________	Stamp file closed. Make final review of checklist. Image and index all documents. File in closed section of file room numerically by closed file number.