DATE

Name

Address

City State ZIP

 **RE: Closing Letter on \_\_\_\_\_\_\_\_\_\_\_\_ Issue**

 **Termination of Attorney-Client Relationship**

Dear Mr./Mrs. \_\_\_\_\_\_\_\_\_:

I hope you are doing well. This letter serves as the final update on your case. I am pleased to report that you have accomplished your objective of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

[Add Final pieces of legal information and advice if necessary]

I have completed all the legal work that I agreed to do in the Attorney-Client Agreement that we both signed on DATE. This means the attorney-client relationship is now terminated. I have notified the Neighborhood Christian Legal Clinic’s volunteer coordinator that I have completed all the legal work I agreed to do, and you should be receiving a survey from the volunteer coordinator soon.

The Neighborhood Christian Legal Clinic’s policy is to destroy client files after a period of five (5) years. Thus, after five (5) years from the date your file is closed, you will no longer be able to access your file since it will have been destroyed. For the next five (5) years, I will retain your file at my office at the following address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

[OR]

The Neighborhood Christian Legal Clinic’s policy is to destroy client files after a period of five (5) years. Thus, after five (5) years from the date your file is closed, you will no longer be able to access your file since it will have been destroyed. I have submitted the file back to the Clinic for storage, so you should then contact the Clinic’s volunteer coordinator at (317) 429-4131.

It has been a pleasure to work with you!

Yours truly,

NAME

Volunteer Attorney for the Neighborhood Christian Legal Clinic