

FORM 3



**REPUBLIC OF NAURU
OFFICE OF THE PUBLIC LEGAL DEFENDER**

WITHDRAWAL OF REPRESENTATION

I _____ of _____ District:-

Do hereby wish to engage my counsel of choice.

I wish to engage the services of _____ to appear on my behalf, until the final determination of this matter.

I was not forced, coerced, assaulted or threatened in any way by anyone to engage the services of _____. I make this decision of my own accord.

Following the above advice and my understanding of the same, I indemnify the Office of the Public Legal Defender and its staff, including my counsel of any liabilities, issues or complaints arising from my withdrawal of legal aid.

.....

Client Name: _____

Date: _____

.....

Counsel: _____

Date: _____