

The Legal Defense Fund and its members are represented by RUCKELSHAUS KAUTZMAN BLACKWELL BEMIS & DUNCAN, LLP F.O.P. attorneys since 1966

Procedure

If you receive written notification of charges, are given the date of a disciplinary hearing, confirm you are under investigation, or are civilly sued or criminally charged, immediately take the following action:

Step 1

Contact a Legal Defense Fund attorney.

Step 2

Provide the attorney with your Legal Defense Fund membership identification number.

Step 3

Upon verification, the Legal Defense Fund attorney will advise you what to do.

Police Officers
Correctional Officers
Reserve Officers
Support Personnel

Legal Defense Fund

Month Joined	Receive Services For Only
March.....	\$195.00
April.....	\$178.75
May.....	\$162.50
June.....	\$146.25
July.....	\$130.00
August.....	\$113.75
September.....	\$97.50
October.....	\$81.25
November.....	\$65.00
December.....	\$48.75
January.....	\$32.50
February.....	\$16.25

Accessing a Legal Defense Fund attorney

The attorneys of Ruckelshaus Kautzman Blackwell Bemis & Duncan, LLP have been providing quality legal assistance to the F.O.P. since 1966. For legal questions, you may contact one of the Legal Defense Fund attorneys during regular business hours, Monday through Friday, at their office in Indianapolis at (317) 634-4356, via fax at (317) 634-8635, or via email at rkb@rkblegalgroup.com.

In addition, as an LDF Member, you will be provided with emergency contact information so that you may reach a Legal Defense Fund attorney at any time in the event of a critical incident.

Note: All benefits, coverages, and terms and conditions are governed by the Legal Defense Fund Plan Description. Interpretation of Plan provisions, including coverages and benefits, is vested exclusively in the Plan's Board of Directors, in its absolute discretion. Plan benefits are excess over all other benefits and coverages. The Plan is subrogated to all rights to recover attorney's fees against any person or entity and has a right of reimbursement from any such recovery. Attorneys paid by the Plan are neither agents nor employees of the Plan. The Plan makes no recommendation or warranty, expressed or implied, with respect to the skill or expertise of such attorneys, including Plan attorneys. You MUST be a member of the Indiana State FOP to be eligible for membership in the Indiana LDF Plan (either an active or associate member).

Legal Counsel For When It's Needed Most



Coverage is effective the first (1st) day after the day the application is approved by the LDF Plan. Applications not fully and accurately completed cannot be processed and may result in ineligibility for and non-payment of benefits.

Indiana State Lodge
Fraternal Order of Police
Legal Defense Fund
1427 E. Washington Street
Indianapolis, IN 46201
(800) 793-6746 (member information)

The Indiana State Lodge of the F.O.P. administers the Legal Defense Fund. The Fund has provided Indiana's law enforcement with legal counsel and protection since 1995.

Benefits

- ★ Quick, direct access to a Legal Defense Fund (LDF) attorney without having to secure prior approval from your local lodge.
★ Twenty-four hour access to LDF attorneys for critical incidents.
★ Legal counsel and representation to appeal the decision, when permitted by law, of any disciplinary board established under statute, local ordinance, administrative rule or contract to the circuit or superior court in the county where the disciplinary decision was rendered.
★ Legal counsel and representation to appeal the decision of the county circuit or superior court to the Indiana Court of Appeals and/or Indiana Supreme Court.
★ Legal counsel and representation commencing at the third stage or equivalent of the disciplinary hearing procedure for a university police officer.
★ Legal counsel and representation if you are charged with a criminal offense in a state or federal court.
★ Legal counsel and representation prior to and during a disciplinary hearing before any disciplinary board established under Indiana statute, local ordinance, administrative rule or contract.
★ Legal counsel/advice if you are sued in state or federal court.
★ Legal counsel/advice if you are under investigation by your department, local, state, or federal authorities.
★ Representation in re-trials or appeals if determined to be meritorious and approved by the Board.
★ Salary Reimbursement Option (SRO): For suspensions where an appeal to a disciplinary board is permitted and still available, and where a plan attorney advises that an appeal has no merit, a member may choose to receive the equivalent of up to three (3) days actual loss of pay or Seven Hundred Fifty Dollars (\$750.00) from the Fund, whichever is less.
★ All Benefits, as detailed above, are provided and covered only for good faith acts or omissions occurring while on duty, performing a duty related act, or while acting in the scope of the member's authority as a police officer.

Eligibility & Enrollment

- ★ The LDF is available to any member of the law enforcement community, including police officers, correction officers, reserve police officers and support personnel directly involved with law enforcement.
★ Enrollment in the LDF Program is easy. Simply visit INSTATEFOP.ORG and apply online, or mail the completed enrollment card and payment to: Legal Defense Fund, 1427 E. Washington Street, Indianapolis, IN 46201
★ New members are accepted throughout the year and membership fees are based on a yearly schedule from March to February.
★ When accepted as an LDF member, you will receive a membership card with your name and LDF membership identification number.

LEGAL DEFENSE FUND ENROLLMENT FORM

Mail your completed enrollment form and payment (check, money order or charge) for the appropriate amount to:

Legal Defense Fund, 1427 E. Washington Street, Indianapolis, IN 46201

Name (Last, First, M.I.) _____
Address: _____

City: _____ State: _____ Zip Code: _____

Work Number: _____ Home Number: _____ Email: _____

Department: _____

Mastercard Visa Card Number: _____ Expiration Date: _____

Please note: Conduct occurring prior to LDF Membership shall not be covered.

I hereby apply for enrollment in the F.O.P. Legal Defense Plan:

Date: _____ Signature: _____