



PHILADELPHIA
BAR ASSOCIATION

Lawyer Referral and Information Service

Panel Membership Experience Requirements

Table of Contents

LRIS Panel Type	Page Number
<u>Administrative Law</u>	
Attorney Discipline	1
Non-Attorney Professional Licenses	2
<u>Disabilities Law - ADA Panels</u>	
Access	3
Employment Discrimination	3
Transportation	3
Adult Protective Services	3
Fair Housing for the Disabled	4
Guardianship & Incapacitation	5
Estate Planning for Persons with Disabilities	5
<u>Admiralty</u>	6
<u>Bankruptcy</u>	
Individual	7
Wage Earner Plan	7
Commercial	7
<u>Civil Rights</u>	
Prisoners' Rights	8
False Arrest	8
Misc / Other	8
<u>Commercial Law</u>	
Anti-Trust	9
Government Contracts	10
Securities	11
<u>Consumer Issues</u>	
Fair Debt Collection	12
Fair Credit Reporting	13
General Consumer Complaints	14
Identity Theft	15
Lemon Law	16
Mortgage Foreclosures	17

Table of Contents

LRIS Panel Type	Page Number
<u>Criminal</u>	
Federal	18
Felony	19
Misdemeanor	20
Juvenile Delinquents	21
Crime Victims	22
Homicide	23
Appeals	24
Property Forfeiture	25
<u>Domestic Relations</u>	
Pre-Marital Agreements	26
Divorce - Complex	27
Divorce - Deferred Payment	28
Custody	29
Visitation	29
Grandparent Visitation	29
Child Support	30
Spousal Support	30
Paternity	31
Adoption	32
Step-parent Adoption	32
International Adoption	33
DHS Matters / Child Abuse	34
<u>Education Law</u>	
Access to Records	35
School Discipline	35
Special Education	36
<u>Elder Law</u>	
Nursing Home Law	37
Medicare	38
<u>Employment Law</u>	
Employee	39
Employer	39
Union	39
Employment Discrimination	40
Family & Medical Leave (FMLA)	41
Wage & Hour (FLSA)	42

Table of Contents

LRIS Panel Type	Page Number
<u>Entertainment Law</u>	
Sports	43
Music & Recording	44
TV, Film, Theater, Modeling	44
Publishing	45
<u>Immigration & Naturalization</u>	46
<u>Intellectual Property</u>	
Copyright	47
Trademark	47
Patent	48
<u>Internet</u>	
Copyright Violation Defense	47
<u>Liquor Control Board</u>	49
<u>Medical Marijuana and Hemp Law</u>	50
<u>Mental Health</u>	51
<u>Negligence / Torts - Plaintiff</u>	
Legal Malpractice	52
Major Jury	53
Medical Malpractice	54
Dental Malpractice	55
LTC Neglect and Abuse	56
<u>Pensions</u>	
Employer	57
Employee	58
ERISA	59

Table of Contents

LRIS Panel Type	Page Number
<u>Products Liability</u>	
Lead Paint	60
Food & Drug	60
Misc / Other	60
Paxil	61
Pelvic Mesh	62
Reglan	63
Risperdal	64
Talc	65
Xarelto	66
Yaz	67
IVC Filter	68
<u>Real Estate</u>	
Condominium/Co-op Conversions & Sales	69
Fair Housing / Housing Discrimination	70
Environmental	71
Litigation	72
Zoning	73
Transactions - Residential	74
Transactions - Commercial	75
<u>Social Security</u>	
Administrative Hearing	76
Appeals to District Court	76
<u>Tax</u>	
City	77
State	77
Federal	77
<u>Wills & Estates</u>	
Small Estate Administration	78
Complex Estate, Trust, Tax Planning and Administration	79
Will Contested / Estate Controversy	80
<u>Workers' Compensation</u>	
Federal	81
State	81
Appeals	81
<u>Waiver Request</u>	
	82

**ADMINISTRATIVE LAW – ATTORNEY DISCIPLINE PANEL
MEMBERSHIP REQUIREMENTS**

The attorney has handled at least three attorney discipline cases within the past two years. The cases must have included the completion of the type of hearing held under Pennsylvania Rule of Disciplinary Enforcement 208(b) or a higher level.

By signing below, the attorney authorizes the LRIS Committee to verify the above information with the Disciplinary Board of the Supreme Court of Pennsylvania.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**ADMINISTRATIVE LAW – NON-ATTORNEY PROFESSIONAL
LICENSES PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has completed at least three professional licensing review cases, at least one of which has proceeded to a complete hearing within the past two years. Please list captions below:
 1. _____
 2. _____
 3. _____

2. The attorney has attended a CLE course for at least three credits within the past three years involving the handling of professional licensing administrative hearings.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DISABILITIES LAW – ADA - ACCESS, TRANSPORTATION, EMPLOYMENT
DISCRIMINATION, ADULT PROTECTION SERVICES PANELS
MEMBERSHIP REQUIREMENTS**

1. The attorney must be familiar with the law and procedures of the Americans with Disabilities Act.

2. The attorney has attended a law school course or CLE course in the area of the ADA for a total of four credits within the two years prior to joining the panel. The attorney agrees to attend an ADA-related CLE course for at least four credits every two years during the time the attorney remains on the panel. Attach proof of attendance.

3. The attorney has been involved in the litigation of at least two disability law matters related to the Americans with Disabilities Act within three years of joining the panel. Please list captions:
 1. _____
 2. _____

4. Should the attorney wish to receive referrals in the ADA panel subcategory of Employment Discrimination, the attorney must meet the requirements of the LRIS Employment Discrimination panel as well as the requirements listed above.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DISABILITIES LAW – FAIR HOUSING PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney must be familiar with the laws governing fair housing for people with disabilities.
2. The attorney has attended a law school course or CLE course in the area of fair housing for a total of four credits within the two years prior to joining the panel. Attach proof of attendance.
3. The attorney has been involved in the litigation of at least two disability law matters related to fair housing within three years of joining the panel. Please list captions:
 1. _____
 2. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DISABILITIES LAW –
GUARDIANSHIP & INCAPACITATION AND
ESTATE PLANNING FOR PERSONS WITH DISABILITIES PANELS
MEMBERSHIP REQUIREMENTS**

1. The attorney must be familiar with the law and procedures governing guardian and estate planning for persons with disabilities.

2. The attorney has attended a law school course or CLE course in the area of guardian and estate planning for persons with disabilities within the two years prior to joining the panel. The attorney agrees to attend a related CLE course every two years during the time the attorney remains on the panel. Attach proof of attendance.

3. The attorney has been involved in the litigation of at least two disability law matters related to guardian and estate planning for persons with disabilities within three years of joining the panel. Please list captions:
 1. _____
 2. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**ADMIRALTY PANEL
MEMBERSHIP REQUIREMENTS**

The attorney meets one of the following requirements (circle one):

1. The attorney is in receipt of proctor status from the Maritime Law Association of the United State or equivalent association,

OR

2. The attorney has practiced maritime law for two years and is a member in good standing of the United States District Court, Eastern District of Pennsylvania. The attorney has completed 25 hours at a maritime seminar approved by the Maritime Law Association of the United States or an equivalent association prior to joining the LRIS panel, or has completed ten credits of post-graduate work in Admiralty at an ABA-accredited law school.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**BANKRUPTCY PANELS
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with bankruptcy laws and procedures under the current Bankruptcy Code.
2. The attorney has appeared in Bankruptcy Court at least twice since the effective date of the Bankruptcy Reform Act of 2005, having been involved in the matter from the beginning of the case to its conclusion.
3. To be eligible to receive consumer bankruptcy cases, the attorney must have been involved in at least three (3) consumer bankruptcy matters that have resulted in discharge.
4. The attorney has attended a continuing legal education course for a least three (3) credits involving the Bankruptcy Reform Act of 2005. Attach proof of attendance.
5. To be eligible to receive business bankruptcy cases, the attorney must have been involved in at least three (3) business bankruptcy matters

OR

the attorney has attended a continuing legal education course on bankruptcy.

6. The attorney has in his office or has immediate access to publications dealing with bankruptcy law/bankruptcy practice.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CIVIL RIGHTS – PRISONERS’ RIGHTS, FALSE ARREST,
MISC /OTHER PANELS
MEMBERSHIP REQUIREMENTS**

1. The attorney meets one of the following requirements:
 - a. Substantial involvement in *at least* three civil rights cases within the past three years,
 - OR
 - b. A minimum of two years’ service as an attorney for any of the following organizations: (Please circle)
 - i. U.S. Department of Justice, Civil Rights Division;
 - ii. Civil Rights Office of other U.S. government agency or department.
Please specify:

 - iii. Pennsylvania Department of Justice, Community Advocate Unit;
 - iv. Public Interest Law Center of Philadelphia;
 - v. Philadelphia Law Department, Civil Rights Division;
 - vi. Non-governmental office which litigates civil rights cases.
Please specify:

2. The attorney has attended a CLE course in the area of civil rights within the past two years, and agrees to continue during the course of panel membership to earn a minimum of two CLE credits every two years from attendance at civil rights-related course. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**COMMERCIAL LAW – ANTI-TRUST PANEL
MEMBERSHIP REQUIREMENTS**

The attorney has represented clients in at least two litigated anti-trust matters and has the staff capacity to handle such matters.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**COMMERCIAL LAW – GOVERNMENT CONTRACTS PANEL
MEMBERSHIP REQUIREMENTS**

The attorney must have had substantial involvement in the negotiation and drafting of at least two government contracts in the past three years.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**COMMERCIAL LAW – SECURITIES PANEL
MEMBERSHIP REQUIREMENTS**

The attorney has represented clients in the preparation and presentation of at least three customer/broker disputes before the appropriate arbitration forums or in litigation.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CONSUMER ISSUES – FAIR DEBT COLLECTION PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney must be familiar with the Fair Debt Collection Practices Act, 15 U.S.C. §1692 *et al.* and Pennsylvania Fair Credit Extension Uniformity Act; and

2. The attorney has:
 - a. completed a CLE course covering fair debt collection litigation within two years prior to joining the panel (attach proof of attendance);

 - b. handled two fair debt collection cases to resolution within the past two years. Please list captions below:
 1. _____

 2. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CONSUMER ISSUES - FAIR CREDIT REPORTING PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney must be familiar with the Fair Credit Reporting Act, U.S.C. §1692 *et al.* (FCRA);
2. The attorney has completed a CLE course covering fair credit reporting issues within two years prior to joining the panel (attach proof of attendance); and
3. The attorney has litigated at least two FCRA cases in federal court through conclusion within two years prior to joining the panel or litigated three such cases total. Please list captions below:
 1. _____
 2. _____
 3. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CONSUMER ISSUES - GENERAL CONSUMER COMPLAINTS PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has completed a CLE course devoted to consumer protection issues with two years prior to joining the panel (attach proof of attendance);

OR

2. The attorney certifies that he/she regularly handles consumer protection matters or that consumer protection cases comprise a consistent aspect of practice.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CONSUMER ISSUES – IDENTITY THEFT PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with the Fair Credit Reporting Act; and
2. The attorney has completed a CLE course devoted to consumer protection issues within two years prior to joining the panel (attach proof of attendance).

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CONSUMER ISSUES – LEMON LAW PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney must be familiar with the Pennsylvania Lemon Law;
2. The attorney has completed a CLE course devoted to consumer protection issues including lemon law or consumer warranty issues, within two years prior to joining the panel

OR

has handled a lemon law case.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CONSUMER ISSUES – MORTGAGE FORECLOSURE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with Pennsylvania Laws Act 6 and Act 91;
2. The attorney has:
 - a. completed a CLE course covering the defense of mortgage foreclosures,
 - OR
 - b. been involved in a mortgage foreclosure case.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CRIMINAL – FEDERAL PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is admitted to practice before the Courts of the Eastern District of Pennsylvania.
2. The attorney has a working knowledge of the federal sentencing guidelines and the Federal Rules of Criminal Procedure.
3. The attorney has handled at least three criminal cases in federal court in the past two years. Please list captions below:
 1. _____
 2. _____
 3. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CRIMINAL – FELONY PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with the practice and procedures of the Pennsylvania Supreme Court and the Philadelphia Court of Common Pleas.

2. The attorney has had substantial involvement in a minimum of five criminal matters which were tried to completion, at least two of which occurred in the past two years. Please list captions:
 1. _____
 2. _____
 3. _____
 4. _____
 5. _____

3. The attorney has had at least two years litigation experience (trial or appellate) in the area of criminal law.

4. The attorney is eligible to receive court appointments for felony cases in the Philadelphia Court of Common Pleas.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CRIMINAL – MISDEMEANOR PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with the Rules of Criminal Procedure, including but not limited to Rules 1000 to 1013.

2. The attorney has had substantial involvement in a minimum of three criminal misdemeanor cases within the past two years. Please list captions below:
 1. _____
 2. _____
 3. _____

3. The attorney is eligible for court appointments for misdemeanor cases in the Philadelphia Court of Common Pleas.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CRIMINAL – JUVENILE DELINQUENTS PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with the Pennsylvania Juvenile Act and the Philadelphia Court of Common Pleas Juvenile Court Rules.

2. The attorney has had substantial involvement in a minimum of three criminal juvenile cases within the past three years. Please list captions below:
 1. _____
 2. _____
 3. _____

3. The attorney is eligible for court appointments in juvenile cases.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CRIMINAL – CRIME VICTIMS PANEL
MEMBERSHIP REQUIREMENTS**

In order to receive referrals regarding representation of crime victims under the Pennsylvania Crime Victims Compensation Act and with regard to third-party lawsuits, the attorney has met the following requirements:

1. Circle one:
 - a. participated in a continuing legal education seminar regarding the rights of crime victims and/or third-party victim litigation,
 - OR
 - b. represented to conclusion a crime victim before the Pennsylvania Crime Victims Compensation Board,
 - OR
 - c. represented a crime victim in civil litigation.
2. Read the statutes and regulations of the Pennsylvania Crime Victims Compensation Board.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CRIMINAL - HOMICIDE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with the practice and procedures of the Pennsylvania Supreme Court and the Philadelphia Court of Common Pleas.
2. The attorney has been sole or lead counsel in the trial of at least one homicide case tried to completion or has served as associate counsel in at least two homicide cases tried to completion. Please list captions below:
 1. _____
 2. _____
3. The attorney is experienced in the use of expert witnesses and scientific and medical evidence, including but not limited to psychiatric and pathologic evidence.
4. The attorney has at least three years' litigation (trial or appellate) experience in the field of criminal law.
5. The attorney has had substantial involvement in at least ten criminal jury trials tried to completion.
6. The attorney is eligible for court appointments in homicide cases in the Philadelphia Court of Common Pleas.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CRIMINAL – APPEALS PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with the Pennsylvania Rules of Appellate Procedure.
2. The attorney has had substantial involvement in a minimum of five felony cases tried to completion in the past three years.
3. The attorney has had substantial involvement in a minimum of three appeals from criminal convictions in the past two years, at least through the filing of appellate briefs. Please list captions below:
 1. _____
 2. _____
 3. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**CRIMINAL – PROPERTY FORFEITURE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with the Federal Civil Asset Forfeiture Reform Act of 2000 and the Pennsylvania Controlled Substances Forfeiture Act; and
2. The attorney has had substantial involvement in at least two asset forfeiture proceedings in state or federal court within the past two years.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DOMESTIC RELATIONS – PRE-MARITAL AGREEMENTS PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has attended a comprehensive CLE seminar within the past two years regarding drafting and enforcing pre-marital agreements and discussion of leading Pennsylvania cases (provide proof of attendance),
2. The attorney has done at least one of the following (Circle one):
 - a. Serving as author of two or more pre-marital agreements,

OR

 - c. Representation of three or more clients in the negotiation of a pre-marital agreement.
3. The attorney has represented to conclusion a client in a dispute over the viability of a pre-marital agreement.
4. The attorney is familiar with sections of the Pennsylvania Domestic Relations Code regarding enforceability of agreements, equitable distribution, alimony and counsel fees.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DOMESTIC RELATIONS – COMPLEX DIVORCE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in a minimum of three equitable distribution masters' hearings.
2. The attorney has been involved in a minimum of three trials in any division of the Court of Common Pleas of Philadelphia County.
3. The attorney has attended a CLE course in divorce law for at least three credits in the past two years (provide proof of attendance).

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DOMESTIC RELATIONS – DEFERRED PAYMENT DIVORCE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in a minimum of three equitable distribution masters' hearings.
2. The attorney has been involved in a minimum of three trials in any division of the Court of Common Pleas of Philadelphia County.
3. The attorney has attended a CLE course in divorce law for at least three credits in the past two years (provide proof of attendance).

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DOMESTIC RELATIONS – CUSTODY, VISITATION AND
GRANDPARENT VISITATION PANELS
MEMBERSHIP REQUIREMENTS**

1. The attorney has represented clients in at least two custody cases through completion within the past two years. Please provide captions below:
 1. _____
 2. _____
2. The attorney maintains membership in the Philadelphia Bar Association's Family Law Section or other similar professional organization that meets regularly to discuss family law issues.
3. The attorney has attended a CLE course in custody and visitation law for at least three credits in the past two years (provide proof of attendance).

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DOMESTIC RELATIONS – CHILD SUPPORT AND
SPOUSAL SUPPORT PANELS
MEMBERSHIP REQUIREMENTS**

1. The attorney has represented clients in at least two support cases through to completion within the past two years. Please provide captions below:
 1. _____
 2. _____
2. The attorney maintains membership in the Philadelphia Bar Association's Family Law Section or other similar professional organization that meets regularly to discuss family law issues.
3. The attorney has attended a CLE course in support law for at least three credits within the past two years (provide proof of attendance).

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DOMESTIC RELATIONS – PATERNITY PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has represented clients in at least two paternity cases through to completion within the past two years. Please provide captions below:
 1. _____
 2. _____
2. The attorney maintains membership in the Philadelphia Bar Association's Family Law Section or other similar professional organization that meets regularly to discuss family law issues.
3. The attorney has attended a CLE course in paternity law for at least three credits in the past two years (provide proof of attendance).

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DOMESTIC RELATIONS – ADOPTION AND
STEP-PARENT ADOPTION PANELS
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least three adoption or step-parent adoption cases within the past two years, with at least one including termination of parental rights.

2. The attorney has attended a CLE course in adoption law for at least three credits in the past two years (provide proof of attendance).

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

DOMESTIC RELATIONS – INTERNATIONAL ADOPTION PANEL
MEMBERSHIP REQUIREMENTS

1. The attorney has had substantial involvement in at least two international adoption matters within the past two years.
2. The attorney is familiar with and has access to the Intercountry Adoption Act of 2000 (22 CFR Part 96 et seq.) and the Hague Convention on Inter-country Adoption.
3. The attorney has attended a CLE course in international adoption law for at least three credits in the past two years (provide proof of attendance).

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**DOMESTIC RELATIONS – DHS MATTERS/CHILD ABUSE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has represented clients in at least one DHS or child abuse matter within the past two years.

2. The attorney has attended a CLE course in child abuse law for at least three credits in the past two years (provide proof of attendance).

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**EDUCATION LAW – ACCESS TO RECORDS AND
SCHOOL DISCIPLINE PANELS
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least three expulsion, school discipline or school records matters within the past five years. Please list captions below:

1. _____

2. _____

3. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**EDUCATION LAW – SPECIAL EDUCATION PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least two cases in the area of special education within the past two years. Please provide captions below:

1. _____

2. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**ELDER LAW – NURSING HOME LAW PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with the Nursing Home Reform Act and applicable provisions of the Americans with Disabilities Act; and
2. The attorney has represented clients in at least two disputes with nursing homes, continuing care retirement communities or similar facilities within the past three years.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**ELDER LAW – MEDICARE PANEL
MEMBERSHIP REQUIREMENTS**

1. Within the past five years, the attorney has handled:
 - a. at least three estate plans involving planning for Medicare qualification

OR

- b. at least three Medicare applications or disputes.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**EMPLOYMENT LAW – EMPLOYER/EMPLOYEE/UNION PANELS
MEMBERSHIP REQUIREMENTS**

1. The attorney meets one of the following requirements:
 - a. Substantial involvement in at least five matters on behalf of employers, employees or unions involving employment law. (Please attach list of captions.)
 - OR
 - b. A minimum of two years service as an attorney for any of the following organizations:
 1. National Labor Relations Board
 2. Pennsylvania Labor Relations Board
2. The attorney has attended a CLE course in employment law for at least three credits in the past two years and agrees to continue during the course of panel membership to earn a minimum of three CLE credits from attendance at employment law courses every two years. Attach proof of attendance.
3. The attorney has access to the following resources:
 - a. NLRB Decisions (official volumes, BNA or CCH);
 - b. NLRB Case Handling Manuals for Unfair Labor Practice Cases and Representation Cases; and
 - c. NLRB Rules and Regulations.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**EMPLOYMENT LAW – EMPLOYMENT DISCRIMINATION PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney must be familiar with the law and procedures applicable to both state and federal employment discrimination law.
2. The attorney initially has to have attended an advanced law school course or a CLE course(s) or seminar(s) on employment discrimination for a total of four (4) hours within two years prior to joining the LRIS employment discrimination panel. Attach proof of attendance.
3. The attorney agrees to attend a CLE course(s) for at least three (3) hours every two years during panel membership and to furnish proof of attendance to the LRIS.
4. The attorney is a member in good standing of the federal bar of a U.S. District Court in Pennsylvania.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**EMPLOYMENT LAW – FAMILY & MEDICAL LEAVE ACT (FMLA) PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney meets one of the following requirements (Circle a.or b.):
- a. Substantial involvement in at least five matters in the past three years on behalf of employees involving Family and Medical Leave Act matters. Please list matters:

OR

- b. A minimum of two years service as an attorney for the United States Department of Labor or a state Department of Labor and Industry handling FMLA matters within the past five years.
2. The attorney has attended a CLE course in employment law including FMLA issues for at least three credits in the past two years and agrees to continue during the course of panel membership to earn a minimum of three CLE credits from attendance at employment law courses including FMLA issues every two years. Attach proof of attendance.
3. The attorney has access to the following resources:
- a. Family and Medical Leave Act, 29 U.S.C. §2601, et seq.;
- b. 29 CFR Part 825 and
- c. U.S. Department of Labor FMLA Opinion Letters.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**EMPLOYMENT LAW – WAGE & HOUR (FLSA) PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney meets one of the following requirements (Circle a. or b.):
- a. Substantial involvement in at least five matters in the past three years on behalf of employees involving wage and hour claims. Please list matters:

OR

- b. A minimum of two years service as an attorney for the United States Department of Labor handling FLSA matters within the past five years.
2. The attorney has attended a CLE course in employment law including FLSA issues for at least three credits in the past two years and agrees to continue during the course of panel membership to earn a minimum of three CLE credits from attendance at employment law courses including FLSA issues every two years. Attach proof of attendance.
3. The attorney has access to the following resources:
- a. Fair Labor Standards Act, 29 U.S.C. §201, et seq.;
- b. 29 CFR Chapter V and
- c. U. S. Department of Labor FLSA Opinion Letters.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**ENTERTAINMENT LAW – SPORTS PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is licensed by the appropriate administrative agency, such as the NCAA or the NFL Players Association.
2. The attorney has represented at least one athlete within the past two years.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**ENTERTAINMENT LAW – MUSIC & RECORDING AND TV,
FILM, THEATER AND MODELING PANELS
MEMBERSHIP REQUIREMENTS**

The attorney has represented entertainers, musicians, artists, performers, actors or models in the negotiation of at least four contracts within the past three years.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**ENTERTAINMENT LAW – PUBLISHING PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has represented authors or publishers in the negotiation of at least two publication contracts in the past three years.

2. The attorney has attended a CLE course for at least two credits in the areas of publishing or copyright in the past two years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**IMMIGRATION LAW PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has attended a CLE course in immigration and naturalization for at least two credits within the past year and agrees to continue to complete at least one relevant CLE every two years while on the panel. Attach proof of attendance.

2. The attorney has had substantial involvement in five INS cases over the past three years. Please provide captions below:
 1. _____
 2. _____
 3. _____
 4. _____
 5. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**INTELLECTUAL PROPERTY – COPYRIGHT AND TRADEMARK PANELS
INTERNET – COPYRIGHT VIOLATION DEFENSE PANEL
MEMBERSHIP REQUIREMENTS**

The attorney has completed a CLE program in the area of trademarks and copyrights within the past two years. The attorney agrees to attend a related CLE course every two years while on this referral panel. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**INTELLECTUAL PROPERTY – PATENT PANEL
MEMBERSHIP REQUIREMENTS**

The attorney must be registered with, and therefore meet all requirements of, the U.S. Patents and Trademarks Office.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**LIQUOR CONTROL BOARD PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has attended the Pennsylvania Bar Institute's course, "The ABCs of Liquor Law," or its equivalent. Attach proof of attendance.

2. The attorney has had substantial involvement in the processing, to conclusion, of at least two PLCB license transfers within the last three years.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**MEDICAL MARIJUANA AND HEMP LAW PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has represented at least two clients on medical marijuana and or hemp law issues in the past two years.
2. The attorney has completed at least two credits of CLE in medical marijuana and/or hemp law within the past two years. Please attach proof of attendance.
3. The attorney is a member of and regularly attends meetings of the Philadelphia Bar Association's Medical Marijuana and Hemp Law Committee.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**MENTAL HEALTH LAW PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has handled at least two matters involving involuntary commitment or related mental health issues within the past three years; and
2. The attorney is familiar with the Pennsylvania Mental Health Procedures Act.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**NEGLIGENCE / TORTS – PLAINTIFF - LEGAL MALPRACTICE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least one legal malpractice case to conclusion by settlement or verdict.

2. The attorney has attended “Avoiding Legal Malpractice” seminar or a CLE program involving legal malpractice for at least two credits within the past two years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**NEGLIGENCE / TORTS – PLAINTIFF - MAJOR JURY PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least three negligence jury cases to conclusion by settlement or verdict. Please provide captions below:

1. _____

2. _____

3. _____

2. The attorney has completed at least two credits of CLE in trial tactics within the past two years. Please attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**NEGLIGENCE / TORTS – PLAINTIFF - MEDICAL MALPRACTICE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least three medical malpractice cases to conclusion by settlement or verdict. Please provide captions below:
 1. _____
 2. _____
 3. _____

2. The attorney has completed at least two credits of CLE in medical malpractice law within the past two years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**NEGLIGENCE / TORTS – PLAINTIFF - DENTAL MALPRACTICE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least one dental malpractice case to conclusion by settlement or verdict. Please provide caption below:

1. _____

2. The attorney has completed at least two credits of CLE in medical malpractice law within the past two years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**NEGLIGENCE / TORTS – PLAINTIFF – NURSING HOME/
LONG TERM CARE NEGLECT AND ABUSE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least three cases involving claims for bodily injury, death, neglect or abuse of residents in Nursing Homes and/or Assisted Living facilities which were brought to conclusion by settlement or verdict. Please provide captions below:
 1. _____
 2. _____
 3. _____

2. The attorney has completed at least three credits of CLE in handling long term care neglect or abuse cases within the past two years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PENSION – EMPLOYER PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has completed a CLE in Pensions and Employee Benefits Law within the past two years and agrees to complete two CLE credits in that area within every two year period while serving on the LRIS panel. Attach proof of attendance.

2. The attorney has access to at least one set of reporters that contain pension and retirement-related provisions of Title 26 and Title 29 of the U.S. Code and applicable regulations and administrative rulings thereunder.

3. The attorney has been involved in the representation of at least two clients in benefits-related litigation.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PENSIONS – EMPLOYEE PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has completed a CLE in Pension and Employee Benefits Law within the past two years and agrees to complete two additional CLE credits within every two year period while serving on the panel. Attach proof of attendance.

2. The attorney has had substantial involvement in the resolution of at least three pension matters.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PENSIONS – ERISA PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has completed a CLE in ERISA law for at least three credits within the past two years. Attach proof of attendance.

2. The attorney has been involved in the representation of at least two clients in ERISA matters within the past three years.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PRODUCTS LIABILITY – LEAD PAINT,
FOOD & DRUG, MISC. /OTHER PANELS
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least three products liability cases

OR

The attorney has handled one products liability case to conclusion by settlement or verdict.

2. The attorney has completed a minimum of five hours of CLE in advanced trial tactics within the past two years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PRODUCTS LIABILITY – PAXIL
MEMBERSHIP REQUIREMENTS**

1. The attorney represents or has represented at least twelve plaintiffs alleged to have been injured by Paxil in civil actions brought in the Court of Common Pleas.
2. The attorney has completed a minimum of five hours of CLE in trial tactics, products liability or class actions within the past three years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PRODUCTS LIABILITY – PELVIC MESH
MEMBERSHIP REQUIREMENTS**

1. The attorney represents or has represented at least twelve plaintiffs alleged to have been injured by Pelvic Mesh in civil actions brought in the Court of Common Pleas.
2. The attorney has completed a minimum of five hours of CLE in trial tactics, products liability or class actions within the past three years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PRODUCTS LIABILITY – REGLAN
MEMBERSHIP REQUIREMENTS**

1. The attorney represents or has represented at least twelve plaintiffs alleged to have been injured by Reglan in civil actions brought in the Court of Common Pleas.
2. The attorney has completed a minimum of five hours of CLE in trial tactics, products liability or class actions within the past three years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PRODUCTS LIABILITY – RISPERDAL
MEMBERSHIP REQUIREMENTS**

1. The attorney represents or has represented at least twelve plaintiffs alleged to have been injured by Risperdal in civil actions brought in the Court of Common Pleas.
2. The attorney has completed a minimum of five hours of CLE in trial tactics, products liability or class actions within the past three years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PRODUCTS LIABILITY – TALC
MEMBERSHIP REQUIREMENTS**

1. The attorney represents or has represented at least twelve plaintiffs alleged to have been injured by Talc in civil actions brought in the Court of Common Pleas.
2. The attorney has completed a minimum of five hours of CLE in trial tactics, products liability or class actions within the past three years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PRODUCTS LIABILITY – XARELTO
MEMBERSHIP REQUIREMENTS**

1. The attorney represents or has represented at least twelve plaintiffs alleged to have been injured by Xarelto in civil actions brought in the Court of Common Pleas.
2. The attorney has completed a minimum of five hours of CLE in trial tactics, products liability or class actions within the past three years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PRODUCTS LIABILITY – YAZ
MEMBERSHIP REQUIREMENTS**

1. The attorney represents or has represented at least twelve plaintiffs alleged to have been injured by Yaz in civil actions brought in the Court of Common Pleas.
2. The attorney has completed a minimum of five hours of CLE in trial tactics, products liability or class actions within the past three years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**PRODUCTS LIABILITY – IVC FILTER
MEMBERSHIP REQUIREMENTS**

1. The attorney represents or has represented at least twelve plaintiffs alleged to have been injured by an Inferior Vena Cava Filter in civil actions brought in the Court of Common Pleas.

2. The attorney has completed a minimum of five hours of CLE in trial tactics, products liability or class actions within the past three years. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**REAL ESTATE – CONDOMINIUM / CO-OP CONVERSION
AND SALES PANEL
MEMBERSHIP REQUIREMENTS**

The attorney has handled at least three transactions involving the purchase or sale of a condominium or co-op unit within the past three years.

OR

The attorney has drafted at least one set of governing documents of a condominium complex, including the declaration, association bylaws and rules and regulations.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**REAL ESTATE – HOUSING DISCRIMINATION PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has represented parties in at least two housing discrimination matters to resolution.

2. The attorney has attended a law school course or CLE course in the area of fair housing for a total of four credits within the two years prior to joining the panel. Attach proof of attendance.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**REAL ESTATE – ENVIRONMENTAL LAW PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least two environmental law related cases within the past three years. Please list captions below:

1. _____

2. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**REAL ESTATE – LITIGATION PANEL
MEMBERSHIP REQUIREMENTS**

The attorney has handled at least two civil actions in the past three years involving a dispute as to a real estate broker's commission, specific performance, partition, enforcement of or defense against liquidated damages clause, quiet title, breach of contract and the like, excluding landlord/tenant disputes.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**REAL ESTATE – ZONING PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has represented clients in a minimum of three zoning matters to conclusion at the administrative hearing or appeal level within the past eighteen months. Please list captions below:
 1. _____
 2. _____
 3. _____

2. The attorney is familiar with and has access to the most recent edition of the Pennsylvania Bar Institute publication, *Winning Zoning Cases in Philadelphia*, the Philadelphia Zoning Code, Regulations Governing Practice Before the Zoning Board of Adjustment of the City of Philadelphia and Philadelphia Local Rule 320.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**REAL ESTATE – TRANSACTIONS – RESIDENTIAL PANEL
MEMBERSHIP REQUIREMENTS**

The attorney has represented the buyer or seller in at least four residential real estate transactions, excluding landlord/tenant, in the past two years.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**REAL ESTATE – TRANSACTIONS – COMMERCIAL PANEL
MEMBERSHIP REQUIREMENTS**

The attorney has represented the buyer or seller in at least four commercial real estate transactions, excluding leasing, in the past two years.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**SOCIAL SECURITY DISABILITY PANEL
(Title II and XVI)
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in a minimum of six Social Security Disability or SSI cases within the past year. Please provide captions below:
 1. _____
 2. _____
 3. _____
 4. _____
 5. _____
 6. _____

2. The attorney has attended a CLE course involving SSD and SSI issues for at least three credits within the past two years and agrees to attend a CLE course involving SSD and SSI issues for at least three credits every two years while on the panel.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

TAX PANELS
MEMBERSHIP REQUIREMENTS

1. Maintenance of basic tax library, including a basic reference set such as CCH, Prentice-Hall, Research Institute of America *or* Mertens; CCH of Prentice-Hall Pennsylvania Tax Service.

2. One of the following (circle one):
 - a. Approximately 1/3 of practice in the federal, state, and local tax area;
 - b. An L.L.M. in taxation;
 - c. A certified public accountant's certificate;
 - d. At least four (4) years of meaningful service with the I.R.S., the Chief Counsel's Office, the Tax Court or the Tax Division of the Department of Justice. Equivalent experience with local or state tax agency would qualify for local and state tax areas.

3. One of the following done in the last two years (circle one):
 - a. Attendance at a CLE course in the area of tax law (attach proof of attendance);
 - b. Acting as a lecturer, panelist or Chair of a CLE seminar;
 - c. Writing or publishing an article, in the area of tax law; or
 - d. Teaching a tax course at the graduate or undergraduate level at a college or university.

4. Active membership and participation in the Tax Sections of the Philadelphia Bar Association, ABA or other similar professional organizations of tax specialists.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**WILLS & DECEDENTS ESTATES – SMALL ESTATE
ADMINISTRATION PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has prepared at least four inheritance tax returns, at least two of which have been prepared within the past three years;
2. The attorney has handled at least four estates to conclusion by agreement or formal accounting, at least two of which have been concluded within the past three years; and
3. The attorney has drafted at least six wills, at least three of which have been drafted within the past two years.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**WILLS & DECEDENTS ESTATES – COMPLEX ESTATE, TRUST AND TAX
PLANNING AND ADMINISTRATION PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has prepared at least two Federal estate tax returns within the past three years;
2. The attorney has handled at least two complex estates from beginning to conclusion by agreement or formal accounting within the past three years;
and
3. The attorney has drafted at least four sets of estate planning documents involving the creation of a Pennsylvania sole use trust, an insurance trust or a trust qualifying for Federal Estate Tax marital deduction.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**WILLS & DECEDENTS ESTATES – WILL CONTEST/
ESTATE CONTROVERSY PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney has had substantial involvement in at least two will contests or estate controversies in Orphan’s Court in the past three years.

2. The attorney has:
 - a. attended a CLE course involving will contests and/or Orphans Court procedure within the past two years (attach proof of attendance),

 - OR
 - b. qualified for membership on the Complex Estate, Trust and Tax Planning and Administration panel.

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

**WORKERS' COMPENSATION PANEL
MEMBERSHIP REQUIREMENTS**

1. The attorney is familiar with the law and procedures under the Pennsylvania Workers' Compensation Act.
2. The attorney has attended a CLE course in workers' compensation law for a total of four credits within the past two years and agrees to complete two credits of CLE in workers' compensation law every two years while on the panel. Attach proof of attendance.
3. The attorney has been involved in the litigation of at least two workers' compensation cases through decision within the past three years. Please provide captions:
 1. _____
 2. _____

I hereby certify that I meet the membership requirements for receiving referrals from LRIS in this area and will maintain compliance with the requirements as long as I accept these referrals.

SIGNATURE _____ DATE _____

NAME _____ ATTORNEY ID # _____

