



Lawyer Referral and Information Service

301 Battery Street, 3rd Floor
San Francisco, CA 94111
Telephone: (415) 477-2374
Fax: (415) 477-2389
URL: <http://www.sfbar.org>

**APPLICATION FOR
BUSINESS LAW PANEL**

(Please complete the application to the extent possible if applying under Rule 6 below)

Name: _____

State Bar number: _____

Telephone: _____

Fax: _____

E-mail address: _____

Principal office address (must be in SF) _____

Mailing address (if different): _____

Number of years of continuous active practice in California: _____

Substantial Equivalent Experience

If you cannot meet the following requirements for panel membership, but believe that you qualify by reason of substantial, equivalent experience, you may submit an outline of such experience, as provided for in Rule 6 of the Lawyer Referral and Information Service Rules.

PART A

Within the past five years, applicant must have handled two matters within EACH selected class (including Class 4A) with the exception of Class 5, for which applicant must have actively represented one business in each selected subclass.

- | | |
|---|--|
| <input type="checkbox"/> (1) Formation of a Business Entity | <input type="checkbox"/> (5) Ongoing Business Consulting |
| <input type="checkbox"/> (2) Dissolution of a Business Entity | <input type="checkbox"/> (A) Retail and wholesale sales |
| <input type="checkbox"/> (3) Sale of all or part of a Business | <input type="checkbox"/> (B) Construction |
| <input type="checkbox"/> (4) Business Disputes, e.g., claimed breach of contracts, etc. | <input type="checkbox"/> (C) Business with alcohol sales |
| <input type="checkbox"/> (A) ADA Compliance for business owners | |

Class 1 - Formation of a Business Entity

Nature of Business Entity

Inclusive dates of representation

1. _____

2. _____

Class 2 - Dissolution of a Business Entity

Nature of Business Entity

Inclusive dates of representation

1. _____

2. _____

Class 3 - Sale of all or part of a Business

Nature of Business or type of transaction

Inclusive dates of representation

1. _____

2. _____

Class 4 – Business Disputes

Nature of Dispute

Inclusive dates of representation

1. _____

2. _____

Class 4 (A) - ADA Compliance for Business Owners

Applicants interested to advise and represent business owners with ADA compliance issues must have handled within the last five years, two cases on behalf of facilities or business entities with respect to ADA compliance litigation and must have a working knowledge of the American’s with Disabilities Act, and California’s Unruh Civil Rights Act and Disabled Persons Act.

I certify that I have a working knowledge of the American's with Disabilities Act, and California's Unruh Civil Rights Act and Disabled Persons Act because:

Date: _____ Signature: _____

Class 4 (A) – ADA Compliance Litigation

1. Case Name: _____ Date Filed: _____

County/Case #/Court: _____

Nature of case: _____

Name of business entity: _____

Judgment or other resolution: _____

2. Case Name: _____ Date Filed: _____

County/Case #/Court: _____

Nature of case: _____

Name of business entity: _____

Judgment or other resolution: _____

Class 5 - Ongoing Business Consulting: I certify that I have actively represented at least one business within each indicated subclass within the past five years.

Nature of Business: _____ Inclusive dates of representation

(A) Retail and wholesale sales: _____

(B) Construction: _____

(C) Business with alcohol sales: _____

PART B

Within the past 5 years, applicant must have handled three significant matters within EACH selected class. Do not list names of clients.

- | | |
|--|--|
| <input type="checkbox"/> (1) International trade agreements | <input type="checkbox"/> (4) Pension or profit sharing plans |
| <input type="checkbox"/> (2) Customs regulations | <input type="checkbox"/> (5) Securities issuance |
| <input type="checkbox"/> (3) Antitrust or unfair competition | <input type="checkbox"/> (6) Securities litigation |

Three (3) matters for class _____:

Nature of Matter	Inclusive dates of representation
1. _____	_____
2. _____	_____
3. _____	_____

Three (3) matters for class _____:

Nature of Matter	Inclusive dates of representation
1. _____	_____
2. _____	_____
3. _____	_____

Three (3) matters for class _____:

Nature of Matter	Inclusive dates of representation
1. _____	_____
2. _____	_____
3. _____	_____

Three (3) matters for class _____:

Nature of Matter

Inclusive dates of representation

1. _____

2. _____

3. _____

Three (3) matters for class _____:

Nature of Matter

Inclusive dates of representation

1. _____

2. _____

3. _____

Three (3) matters for class _____:

Nature of Matter

Inclusive dates of representation

1. _____

2. _____

3. _____

I had full responsibility for all cases listed in the application, or if not, I have attached an explanation.

Date: _____ Signature: _____