

## **Application**

THIS IS THE CURRENT APPLICATION for the Allegheny County Bar Association (ACBA) Lawyer Referral Service (LRS). If you would like to join the Lawyer Referral Service, please complete and return this application to the ACBA LRS, 400 Koppers Building, 436 Seventh Avenue, Pittsburgh, PA 15219.

Your completed Lawyer Referral Service application must include the following:

- Completed Lawyer Referral Service Application, Membership Selection and Membership Agreement;
- 2. Proof of Professional Liability Insurance;
- 3. Panel Membership Fee (See Membership Selection Form) by check payable to ACBA-LRS or credit card using the attached form.

If you wish to join any of the following panels you must submit a completed experience panel application form for each such panel chosen:

Aviation Personal Injury
Dental Malpractice
Domestic/Matrimonial Appellate Practice
Legal Malpractice
Medical Malpractice
PCRA Petitions
Products Liability
Vaccine Litigation
Complex Support/Paternity
Complex Criminal Litigation
Complex Divorce/Equitable Distribution
FMLA Claims
FLSA Claims

If you have any questions about these forms or the Lawyer Referral Service, please call Whitney Hughes, Esq. at 412-402-6703.

# **ACBA Lawyer Referral Service Application**

our o	circumstances etency, and tha	comply with that you are prep	nose rules relat ared to comply	ing to mainta with the repo	e rules of the LRS and aining an office, liability orting procedures and re	insurance, and
1.	Name:	LAST	FIRST	M.I.	PA I.D. Number:	
2.	Phone: (	)		Fax: (	)	
3.	Firm Name:_					
4.	Office Addres	ss:				
5.						
6.						
7.	I was admitte	d to the PA Bai	r on:			
8.	In what other	state(s) are yo	u licensed to pr	ractice law?_		
9.	Have you bee	en admitted to t	the U.S. District	Court for the	e Western District of Pe	ennsylvania? □ yes □ no
10	.Have you bee	en admitted to t	the U.S. Court o	of Appeals for	r the Third Circuit?	u yes u no
11	.I am fluent er	ough in the fol	lowing languag	es to commu	nicate with clients:	
12	My office is e	quipped with T	TY/TDD (Teleco	ommunication	ns Device for the Deaf).	☐ yes ☐ no
13	.Do you permi	t your secretar	y to schedule a	ppointments	with clients?	□ yes □ no
14	.Are you willin	g to meet clien	ts at their home	e?		□ yes □ no
15	•	•	s outside Allegh			u yes u no
16	.Are you a me	mber of the All	egheny County	Bar Associa	tion?	□ yes □ no
17	. Would you lik	e to join the A0	CBA Lawyer Re	ferral Service	e Committee?	□ yes □ no

# 18. I have experience in and consider myself qualified to accept referrals in the following areas of law: (MARK WITH AN "X" NO MORE THAN TWENTY FIVE PANELS IN NO MORE THAN SEVEN AREAS OF PRACTICE)

\*The selection of Pro-Bono panels will not count as one of your twenty selections
\*\*If you select one of these panels, you must complete the appropriate experience panel applications

ADMINISTRATIVE	☐ State Criminal Law	☐ Patent Law
□ Administrative Law	☐ Vehicle Code	(Note: If you choose this panel you must provide your
☐ Department of Public Welfare ☐ Environmental Law	☐ Welfare Fraud	Patent and Trademark Office Registration Number here
	☐ Complex State Criminal Law**	☐ Copyright / Trademark Law
☐ Federal Workers' Compensation	DISABILITIES LAW	a copyright / Hademark Law
☐ Federal Workers' Compensation Appeals ☐ Housing and Urban Development/Housing Authority		LIABILITY
	☐ American Disability Act ☐ Education of the Disabled	☐ Asbestos / Mesothelioma
☐ Immigration	Laucation of the disabled	☐ Auto Accident—Defendant
□ Non-Attorney Professional Licenses	ELDED LAW	□ Auto Accident—Plaintiff
□ PA Liquor Control Board	ELDER LAW	☐ Aviation Personal Injury**
□ Public Utility Commission	☐ Elder Law	☐ Class Action Suits
□ School Law (K-12)	EMPLOVMENT/LABOR	☐ Dental Malpractice**
☐ Educational Law (Post-Secondary)	EMPLOYMENT/LABOR	☐ Legal Malpractice**
☐ Social Security Appeals	☐ Civil Service	☐ Libel / Slander
□ Social Security Disability	☐ Employee Benefits	
□ Social Security Overpayments	☐ Employment Contracts / Non-Compete Clauses /	☐ Medical Malpractice**
☐ State Workers' Compensation Appeals	Severance Agreements	☐ Medical Malpractice—Prescription Drug
□ Veterans' Benefits	☐ Employment Discrimination	☐ Personal Injury
☐ State Workers' Compensation	☐ Federal Government Empl.	☐ Personal Injury—Slip and Fall
□ Election Law / Voting Issues	☐ FMLA Claims**	☐ Products Liability**
☐ Vital Records	☐ FLSA Claims**	□ Property Damage
	☐ Labor Law / Employees / Union	☐ Psychiatric Malpractice
ARTS AND THE LAW	☐ Labor Law / Management	☐ Public Transportation Personal Injury
☐ Arts and Entertainment Law	☐ Retirement Benefits—Social Security / Pension	☐ Vaccine Litigation**
	☐ Wrongful Discharge	Veterinary Malpractice
BUSINESS	Unemployment Compensation	
■ Banking	Unemployment Compensation Appeals	MEDICAL MARIJUANA
☐ Business Law		☐ Medical Marijuana
☐ Construction Law	ESTATES	
☐ Contract Law	■ Estate Planning	MENTAL HEALTH
☐ Non-Profit Business Law	☐ Hospital / Home Visits	■ Mental Health
☐ Securities and Exchange Comm.	□ Probate Estates / Wills	☐ 302 Expungements
☐ Tax Law	■ Will Contests	
		MILITARY LAW
CIVIL RIGHTS	FAMILY	■ Military Law
☐ Civil Rights	□ Adoption	
☐ LGBTQ+ Rights	☐ Child Abuse Expungements	MUNICIPAL LAW
□ Police Misconduct	☐ Children and Youth Services	☐ Municipal Law
☐ Prisoners' Rights	☐ Collaborative Law	
•	☐ Custody	PROCEDURAL
CONSUMER RELATED	☐ CYF Reimbursements	□ Court of Common Pleas Appeals
☐ Auto Warranty	☐ Domestic / Matrimonial Appellate Practice**	☐ Magistrate / Arbitration Appeals
□ Bankruptcy	☐ Domestic Partnership Dissolution	☐ Magistrate Hearings—Civil
□ Collections—Debtor	☐ Divorces / Annulments / Pre-Nuptial Agreements	☐ Non-Magistrate Civil Litigation—Plaintiff
□ Collections—Creditor	☐ Grandparent Visitation	■ Non-Magistrate Civil Litigation—Defendant
□ Consumer Affairs	☐ Guardianship	ů ů
☐ Contractor/Home Repair Claims	☐ Name Change	REAL ESTATE
☐ Fair Credit Reporting	☐ Protection from Abuse	☐ Condominium / Co-Op
□ Foreclosures	☐ Support/Paternity	☐ Deed Transfers
☐ Identity Theft / Financial Fraud	☐ Exceptions	☐ Landlord / Tenant—Commercial
☐ Insurance Law—Homeowners	☐ Complex Support/Paternity**	☐ Landlord / Tenant—Landlord
☐ Insurance Law— Automobile	☐ Complex Divorce / Equitable Distribution**	☐ Landlord / Tenant—Tenant
☐ Insurance Law—Medical	a complex bivoice / Equitable bistribution	☐ Marcellus Shale
□ Insurance Law—Life	FIREARMS	☐ Oil & Gas
☐ Insurance Law—Diminished Value Claim	□ PICS Denial	☐ Real Estate—Closings
- Insurance Law-Diminished value Claim	T 100 Delilai	☐ Real Estate—Land Matters
CRIMINAL	HEALTH CARE	☐ Real Estate—Property Reassessment
□ DUI		☐ Sheriff Sale Purchases
	☐ HIPAA / Privacy Issues	☐ Boundary Line / Neighbor Disputes
☐ Expungements / Pardons ☐ Federal Criminal Law	☐ Hospital Law ☐ Medical Records	☐ Conservatorships
☐ Juvenile Law	→ INIGUICAL NECULUS	— Odrisor vatorsnips
■ Juvelille Law		

INTELLECTUAL PROPERTY

□ Computer Litigation

☐ Internet Law

☐ Magistrate Hearings—Criminal

☐ PCRA Petitions\*\*

☐ Property Forfeiture

# Full Membership\* One-Year Membership ACBA Member \$300.00 Non-ACBA Member \$470.00 \* Full Membership entitles the panel member to join no more than 25 regular fee panels plus the Disaster Relief Panel (optional).

\$175.00

19. Membership Selection

Limited Membership

☐ Half-Year Trial Membership

## DISASTER RELIEF

20.	I am willing to participate on the disaster relief panel and I will render services in the following areas of practice:					
	☐ Landlord/Tenant	☐ Bankruptcy				
	☐ Condemnation	☐ Contractor/Repair				
	☐ Insurance	☐ Environmental				
	☐ Financial Assistance (e.g. FEMA)	☐ Estates				
	☐ Family Law	☐ Personal Injury				
	☐ Flood Relief					
	I understand that the Disaster Relief panel not count toward my twenty selections of r	is a special panel and selection of subpanels does egular panels.				

# ACBA Lawyer Referral Service Application for Complex Support/Paternity Cases

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:				
I certify that I have at least five years of have handled to their conclusion, at least (Please provide caption.)	•	ndling complex sup	port/paternity cases, and	I
1				
2				
I further certify that I have accrued at lea Relations/Family Law in the last two yea	ast twelve hours o	of CLE credit in the	area of Domestic	
Name of Seminar	Date	Sponsor	Credits	
1				
2				
<ol> <li>4.</li> </ol>				
	Signature	:		
	Date:			

# ACBA Lawyer Referral Service Application for Complex Divorce/Equitable Distribution

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:				
I certify that I have at least five years of cases, and have handled to their concletease provide caption.)	•		orce/equitable distribution	
1				_
2				_
I further certify that I have accrued at le Relations/Family Law in the last two ye	east twelve hours o	of CLE credit in the	area of Domestic	
Name of Seminar	Date	Sponsor	Credits	
1				_
2				
3				
4.				
	Signature	:		_
	Date:			

# ACBA Lawyer Referral Service Application for Complex Criminal Litigation

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:	
I certify that I have at least five years of at least two jury trials through verdict. (Please provide caption.)	experience with complex criminal cases, and that I have handled
1	
2	
	Signature:
	Date:

## ACBA Lawyer Referral Service Application for Post Conviction Relief Act Panel

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:			
I certify that I have handled to their cond (Please provide caption.)	clusion through fin	al ruling at least tw	o PCRA Petitions.
1			
2			
I further certify that I have accrued at lean the last two years. This CLE credit has			area of Criminal Practice
Name of Seminar	Date	Sponsor	Credits
1			
2			
3			
4			
	Signature	o:	
	Date:		

# ACBA Lawyer Referral Service Application for FLSA Claims Panel

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:			
I certify that I have at least two FL arbitration within the past five year		_	ત્રી settlement or final
1			
2			
I further certify that I have accrued Law within the past two years. Th	d at least 12 hours of Cl	_E credit in the area	as of Employment or Labor
Name of Seminar	Date	Sponsor	Credits
1			
2			
3			
4			
	Signatur	e:	
	Date: _		

# ACBA Lawyer Referral Service Application for FMLA Claims Panel

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:			
I certify that I have at least two FMLA arbitration within the past five years.		•	al settlement or final
1			
2			
I further certify that I have accrued at Law within the past two years. This 0			
Name of Seminar	Date	Sponsor	Credits
1			
2			
3			
4			
	Signature	:	
	Date:		

# ACBA Lawyer Referral Service Application for Domestic/Matrimonial Appellate Practice Panel

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:			
I certify that I have handled to their con two domestic relations cases involving			
1			
2			
I further certify that I have accrued at le last two years. This CLE credit has been			area of family law in the
Name of Seminar	Date	Sponsor	Credits
1			
2			
3			
4			
	Signature	):	
	Date:		

# ACBA Lawyer Referral Service Application for Aviation Personal Injury Panel

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:				
I certify that I have handled to their concluaviation personal injury case that has pro				
1				
I further certify that I have accrued at lea or civil litigation in the last two years. Thi	st twelve hours o	of CLE credit in the	area of personal injury	
Name of Seminar	Date	Sponsor	Credits	
1				
2				
3				
4				
	Signature	:		
	Date:			

# ACBA Lawyer Referral Service Application for Dental Malpractice Panel

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:			
I certify that I have handled to their one dental malpractice case that has	•		
1			
I further certify that I have accrued a civil litigation in the last two years. The state of the			
Name of Seminar	Date	Sponsor	Credits
1			
2			
3			
4			
	Signature	:	
	Date:		

# ACBA Lawyer Referral Service Application for Legal Malpractice Panel

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:				
I certify that I have handled to their conclusione legal malpractice case that has proceed	•			
1				
I further certify that I have accrued at least civil litigation in the last two years. This CL				y or
Name of Seminar	Date	Sponsor	Credits	
1				
2				
3				
4				
	Signature	:		
	Date:			

# ACBA Lawyer Referral Service Application for Medical Malpractice Panel

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME: \_\_\_\_\_

I certify that I have handled to their conclone medical malpractice case that has p caption.)	•			
1				
I further certify that I have accrued at lea civil litigation in the last two years. This C				•
Name of Seminar	Date	Sponsor	Credits	
1				
2				
3				
4				_
	Signature	):		
	Date:			

# ACBA Lawyer Referral Service Application for Products Liability Panel

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:			
I certify that I have handled to their one products liability case that has			
1			
I further certify that I have accrued a or civil litigation in the last two years			
Name of Seminar	Date	Sponsor	Credits
1			
2			
3			
4			
	Signature:_		
	Date:		

# ACBA Lawyer Referral Service Application for Vaccine Litigation

In order to receive referrals on the above-referenced panel you must complete the following form and return it with your panel application.

NAME:				
I certify that I have handled to their conclone vaccine personal injury case that has part.	usion through se proceeded at leas	ettlement, judgmen st through discovery		
I further certify that I have accrued at lead or civil litigation in the last two years. Thi	st twelve hours o	of CLE credit in the		ıry
Name of Seminar	Date	Sponsor	Credits	
1				
2				
3				
4				
	Signature	ı:		
	5 5 20000			
	Date:			

## **ACBA Lawyer Referral Service Membership Agreement**

- 1. I certify that the information contained in my application for membership with the Lawyer Referral Service is true and correct to the best of my knowledge. I understand that if any of the information which I have provided is false, I may be removed from the Lawyer Referral Service (LRS) panel or panels. I further agree to promptly provide LRS with any changes to the information listed above while I am a participating panel member in the LRS program.
- 2. I/we understand that I/we must abide by the Rules and Procedures promulgated by the Lawyer Referral Service. Additionally, I/we understand that a violation of these rules may result in removal from the Lawyer Referral Service panel(s).
- 3. I certify that I currently carry professional liability insurance and that I will maintain my insurance coverage so long as I remain a participating member of LRS. If I terminate my coverage, I will immediately notify the LRS at which time my name will be withdrawn from the LRS referral panel(s). I agree to keep a current copy of my professional liability insurance policy on file with the LRS office. I understand that if the LRS office is not notified of my renewal, I will be removed from the LRS panel(s) until such notification is provided. (Please enclose proof of professional liability insurance with this application.)
- 4. I understand that full annual panel membership dues are \$300.00 if I am a current active member in good standing with the ACBA, and \$470.00 if I am not a member in good standing of the ACBA. I may elect to join for multiple years, participate in reduced fee programs, and/or select a limited membership for a reduced dues rate. I understand that failure to pay annual membership dues will result in my name being withdrawn from the LRS panel(s). I further understand and agree to pay a fifteen percent (15%) referral fee to the Allegheny County Bar Association for all fees which from cases which were referred to me by the LRS. I agree not to increase the cost of legal services performed for a client referred to me by the LRS to cover any fees or costs associated with membership in the Lawyer Referral Service. Membership dues and fees paid in the Lawyer Referral Service of the Allegheny County Bar Association and the required remittance are not deductible as charitable contributions for Federal Income Tax purposes. However, both may be deducted as business expenses.

5. I certify that I am competent to handle legal matters in the areas for which I have indicated on my application. On determining competency, the standard shall be the definition of legal competence employed by the American Law Institute-American Bar Association Committee on Continuing Professional Education. The ALI-ABA definition states:

A competent lawyer is one who consistently performs legal services that he or she is hired or assigned to perform in a way that fills the clients' needs in a reasonable time, at a reasonable cost, and in keeping with relevant standards of professional behavior and responsibility.

- 6. I recognize the LRS as a means and opportunity to enable the legal profession to render better service to the public and, accordingly, agree to give consideration to the client's ability to pay, along with the other factors which I may use to determine my fee.
- 7. I certify that I have not been suspended from the practice of law nor found to be in violation of the Pennsylvania Code of Professional Responsibility during the past year. In the event I am suspended from the practice of law for any reason, I agree to notify the LRS immediately of said suspension.

## **RELEASE FROM LIABILITY:**

I understand that the information contained in my LRS application may be provided to clients and I hereby give my consent thereto. I will in no event hold the Allegheny County Bar Association or any officer or committee member to any liability whatsoever in connection with information released by the Lawyer Referral Service.

I agree to indemnify and save harmless the Allegheny County Bar Association and its Lawyer Referral Service from any and all liability, damages and/or expenses, including attorney fees, incurred by it as a result of any claim, demand, cost or judgment arising out of my representation of any client referred to me pursuant to this agreement or any claim, demand, cost or judgment made by co-counsel in the matter.

Name	Date	
Managing Partner/Owner Signature		

## **ACBA Lawyer Referral Service Rules and Procedures**

- 1. PURPOSE—The purpose of the Lawyer Referral Service (LRS) is to provide, as a public service, a service through which a person, may be referred to an attorney who is able to render and is interested in rendering legal services or referred to an appropriate agency.
- 2. THE COMMITTEE—The LRS Committee is charged with:
  - A. Developing and recommending to the Allegheny County Bar Association (ACBA) Board of Governors policies, rules and procedures for the operation of the LRS; and
  - **B.** Oversight of the ACBA's administration of the LRS program.

The Committee will be composed of members of the ACBA who are appointed by the President of the ACBA.

### 3. REQUIREMENTS OF THE PARTICIPANT PANEL MEMBER—

- A. To qualify for membership on the LRS panel, an attorney must:
  - 1. Have available a law office in Allegheny County where confidential meetings with clients may take place, and be actively engaged in the practice of law; and
  - 2. Carry, and continue to carry, professional liability insurance substantially equivalent to the coverage endorsed by the ACBA.
- **B.** Because each member's relationship with a referred person reflects upon the LRS and on the ACBA, a member to whom any person has been referred shall carry on any relationship with the person in a professional and business-like manner in all respects, consistent with the Pennsylvania Rules of Professional Conduct.
- **C.** Each prospective member shall submit an application and abide by the rules set forth herein and on the application form and shall pay a fee, as established by the ACBA.
- **D.** The applicant shall indicate not more than 25 areas of law in which the applicant desires to accept referrals.
- E. In accepting the application form from any applicant, the LRS may require such information and certification as it deems necessary.
- **F.** The Committee may at any time conduct further investigations and require further information bearing upon the responsibility, capability, character and integrity of any applicant or member. The Committee may also require such information as it deems necessary in accepting the application or continuing the membership of any applicant or member.
- G. The applicant, upon receiving an additional services case, agrees to submit a copy of the fee agreement signed with the client for said case.
- **H.** Each member agrees:
  - 1. To permit any dispute concerning fees arising from a referral to be submitted to binding arbitration by the Special Fee Dispute Committee of the ACBA:
  - 2. To grant all persons referred by the LRS an appointment as soon as practicable after the request is made;
  - 3. To abide by all the rules of the LRS, and in no event to hold, or claim to hold, the LRS or the ACBA, or any of their officers, members or employees, liable for the operation of the LRS, or for the use of the information contained in the member's application:
  - **4.** To annually certify to the LRS that the member has not been suspended from the practice of law or found to be in violation of the Pennsylvania Code of Professional Responsibility during the past year.

## 4. FAILURE TO COMPLY WITH THE LRS RULES—

- **A. 1.** An applicant or member may be denied membership on the panel or suspended from the panel if the applicant or member has failed to pay any fee, failed to make such reports as are required by the LRS, failed to meet with the person referred to him or her, failed to continue to meet the requirements of Rule 3.A., or has been suspended or disbarred from the practice of law.
  - 2. An applicant or member denied membership or suspended under Rule 4.A.1. may apply to the LRS Committee for membership or reinstatement after proof that he or she has complied with the requirements contained therein.
- B. 1. An applicant or member may be denied membership on the panel or suspended from the panel by the LRS Committee if:
  - a. He or she has signed any application or any other certification or report to the LRS which has been found to be untrue in any material respect; or
  - **b.** The LRS Committee receives notice or information giving it reasonable grounds to believe that an applicant or member does not meet the reasonable standards of responsibility, capability, character or integrity; or

- **c.** The LRS Committee finds the applicant or member to be unsuitable for panel membership.
- 2. Before finding any violation of Rule 4.B.1., the LRS Committee must provide an applicant or member an opportunity to be heard, including providing reasonable notice and a hearing. At the hearing, a majority vote of the LRS Committee members present will be necessary to deny membership or suspend a member for violation of Rule 4.B.1.
- **3.** An applicant or member denied membership or suspended under Rule 4.B.1. may apply to the LRS Committee for membership or reinstatement on the panel. Membership or reinstatement shall be permitted upon the approval of the majority of the members of the LRS Committee present at the next scheduled meeting.
- **C.** All matters arising out of Rules 4.A. and B. concerning members or applicants will be held confidential but may be referred to the ACBA Board of Governors, where appropriate.

### 5. OPERATION OF THE PANEL—

- **A.** Procedures will be established which assure that each referral is made in a fair and impartial manner to an appropriate member of the LRS panel. Such procedures should be designed so as to respond, if possible, to the circumstances of the matter, including the subject of the legal problem presented, geographical convenience and language needs.
- **B.** No referral shall be made on the basis of race, color, creed, ethnicity, national origin, religion, sex (gender), sexual orientation, gender identity or expression, genetic information, mental or physical disability, familial status, veteran status, or age.
- C. No referral shall be made to any employee of the LRS or to his or her associates or employees, and all referrals shall be made to the next available member in the appropriate area of law.
- **D.** The person referred shall be furnished with written explanatory information relative to LRS referrals, including information about the first consultation fee to be paid and the extent of legal services which will be rendered for such fee.
- **E.** Members will accept any referral for initial consultation of any matter within any of the member's designated areas of law. However, should any referral give rise to a conflict of interest, a member will contact the LRS to advise that a new referral is necessary. Nothing herein will be construed to obligate a member to accept employment beyond the initial consultation.
- **F.** Each member agrees to consult with the person referred. In the event the client's needs fall outside the member's practice area, the member should contact the LRS to determine whether another referral is appropriate. Referrals to Non-LRS attorneys should only be made with the prior authorization of the ACBA-LRS Director.
- **G.** In the event the member refers client to another attorney, the member will notify the attorney that this is a LRS case which is subject to all LRS Rules and Policies, including the percentage fee remittal requirement and will notify the ACBA LRS as well. In the event that the attorney does not agree to be bound by the rules and procedures, the case will be referred back to the ACBA LRS.
- **H.** A member rejecting initial referrals for any reason will be moved to the bottom of rotation.
- I. A member may receive referrals only at a location where the member maintains a law practice.
- **J.** The daily administrative operation and personnel management of the LRS will be under the direction of the LRS Director and the Executive Director of the Allegheny County Bar Association.
- **6. ACKNOWLEDGMENT AND REPORT OF REFERRALS**—The member will complete and return any referral report forwarded by the LRS staff as soon as practicable, no later than the time specified on the report. Failure to return the report within the time specified may justify the LRS in suspending the participant member from the panel per Rule 4.A.1. Nothing herein will require any attorney to violate the Pennsylvania Rules of Professional Conduct.

## 7. FEE for MEMBERSHIP—

- A. Each member will pay to the LRS an annual membership fee as set forth in the LRS Membership Application.
- B. In addition, each member shall pay to the LRS 15% of the total fee received for services performed with respect to the referred matter.
- **C.** Should the member perform services for the person referred with respect to any matter beyond the initial matter, any fees received by the member for such services are subject to this Rule for three years from the date the attorney is retained.
- D. The percentage fee requirement shall last so long as the member continues to collect on matters commenced within this time period.
- **E.** If the member is affiliated with a firm or partnership, while listed with the LRS, and is retained to perform additional services for a referred client, the obligation to pay percentage fees in accordance with LRS policies remains with the individual or firm as the representation continues. This is indicated by both the member's signature as well as the signature of the managing partner or firm administrator below.
- **F.** Payments required by this Rule shall be due to the LRS within 30 days after receipt by the member. Failure to make timely payments may result in the imposition of late charges and/or suspension from the panel per Rule 4.A.1.

- **8. RECORDS**—The LRS will keep on file a confidential record of all applications submitted by, referrals made to, and reports submitted by each member, which will be subject to examination by the Committee and LRS staff.
- **9. PUBLICITY**—The LRS shall develop and maintain an active publicity program using communications media best designed to inform the general public in Allegheny County of the existence, purpose and advantages of the LRS and the kinds of information and services available. Whenever possible, the public shall be informed as to when to seek legal advice. The form and content of all publicity regarding the LRS shall be dignified and consistent with the Pennsylvania Rules of Professional Conduct.
- 10. FEES TO BE CHARGED—Each referred person shall receive an initial consultation of not more than one half hour at no charge, except in certain cases as determined by the LRS. Any fee for additional services shall be determined by mutual agreement between the client and the member, and such agreement shall be reduced to writing and signed by the client and the member. The LRS shall inform the referred person of the substance of this Rule at the time the referral is made. Every member shall establish his/her fees in accordance with the spirit and letter of the provisions of the Rules of Professional Conduct.
- 11. AREAS OF LAW—A listing of areas of law will be published from which an applicant or member may select or change the areas for which he or she will be available. Attorneys must practice actively in the areas of law selected by them. Any changes in the areas of law must be made in writing.

# **ACBA Lawyer Referral Service Credit Card Remittal Form**

This form is for the sole purpose of the payment of the ACBA LRS Panel Registration Fee.

Attorney Name:
Credit Card Type (MC/VISA/AM EX):
Credit Card Number:
Expiration Month/Year:
CVV Number:
Amount:
Attorney Signature: