

Estate Planning & Probate 2010 2011

Subject Matter Application

(Rev 6/21/10)

Name: (please print) _____

Are you Board Certified in Estate Planning? _____ yes _____ no

If yes, please indicate below the panels in which you wish to receive referrals. You are not required to provide cause and style numbers. You may choose an unlimited number of categories below. Please sign the form.

If not board certified, please complete the form, providing the corresponding information. You may choose an unlimited number of sub panels below (for which you are qualified). Please sign the form.

Part A Selections

For EACH selected panel, you must have handled **within three (3) years of the date of this application**, through discovery, two (2) cases in the sub panel, AND **within five (5) years of the date of this application** must have handled two (2) cases of any kind (civil or criminal) through bench or jury trial in any court of record.

___ Will contests or trust dispute

___ Contested guardianship

___ Lawsuits involving a fiduciary

Identify two (2) cases **within three (3) years of the date of this application** through discovery in same sub panels as you wish to receive referrals. Repeat for each sub panel, using the extra sheet if necessary.

1. Style, Case No., County: _____ Year of Disposition _____

Nature of Case _____

Judgment or resolution _____ Your client _____

2. Style, Case No., County: _____ Year of Disposition _____

Nature of Case _____

Judgment or resolution _____ Your client _____

3. Style, Case No., County: _____ Year of Disposition _____

Nature of Case _____

Judgment or resolution _____ Your client _____

Identify two (2) cases of any kind **within the last five (5) years of the date of this application** through bench or jury trial in any court of record. Do not repeat for each sub panel.

1. Style, Case No., County: _____ Year of Disposition _____

Nature of Case _____

Judgment or resolution _____ Your client _____

2. Style, Case No., County: _____ Year of Disposition _____

Nature of Case _____

Judgment or resolution _____ Your client _____

Part B Selections

___ Draft wills, trusts with estate tax planning

___ For referrals involving wills and trusts for estates requiring tax planning, I certify that I have participated in preparing three (3) taxable estates and/or drafting of living trusts and/or family partnerships **within three (3) years of the date of this application.**

___ Living trusts

___ Specialty trusts

___ Elder Law

___ Nursing home Medicaid planning/liens

___ Medicare benefits/liens

___ Adult Protective Services

___ I certify that 20% of my practice is in tax, estate planning, or probate law and I have disclosed this percentage on my application for malpractice insurance. I certify that I have nine (9) hours CLE in tax, estate planning, or probate law in the past three (3) years.

Part C Panel Selections

For any of the selected law types below, you are not required to prove prior experience. Please indicate the sub panels in which you wish to receive referrals.

___ Simple wills, wills with trusts, living trusts for non-taxable estates (draft / review)

___ Probate simple will, no contest expected

___ Guardianship, application for uncontested or permanent temporary guardianship

___ Durable powers of attorney

___ Match Program simple wills (reduced fee)

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

Date _____ Signature _____