UNITED STATES DISTRICT COURT

SOUTHERN DISTRICT OF WEST VIRGINIA

AT SELECT ONE:

V.

Select: **NUMBER**

STATEMENT OF VISITING ATTORNEY AND DESIGNATION OF LOCAL COUNSEL

Select:

Name of Visiting Attorney and firm name *Bar ID number*

Name of party represented

Name and address of the Bar(s) of which the Visiting Attorney is a member in good standing

Visiting Attorney's office address

Visiting Attorney's office telephone number *Office fax number* *Email address*

WV

Name of Sponsoring Attorney and firm name *WV Bar ID number*

Sponsoring Attorney's office address

Sponsoring Attorney's office telephone number *Office fax number* *Email address*

VISITING ATTORNEY'S CERTIFICATION

I hereby certify that I am a member in good standing of the Bar(s) listed in the Statement of Visiting Attorney. I further certify that I have paid the West Virginia State Bar its prescribed pro hac vice fee for this case, and complied with the West Virginia State Bar's requirements for attorneys admitted pro hac vice.

_____ _____ SIGN HERE

Date ***Signature of Visiting Attorney***

SPONSORING ATTORNEY'S CERTIFICATION

I hereby certify that I am admitted to practice before the Supreme Court of Appeals of West Virginia, I am a member in good standing of the West Virginia State Bar, and I am a member of the bar of this Court. I further certify that I have an office for the practice of law in West Virginia, and I practice law primarily in West Virginia. I agree that pleadings, notices, and other papers may be served on me in this case. I consent to being the Sponsoring Attorney for the above-named Visiting Attorney and I shall hereafter sign all papers that require the signature of an attorney.

_____ _____ SIGN HERE

Date ***Signature of Sponsoring Attorney***