UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF WEST VIRGINIA

STATEMENT OF VISITING ATTORNEY
AND DESIGNATION OF LOCAL COUNSEL

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v.		
VISITING ATTORNEY INFORMATION		
Name of Visiting Attorney and firm name	Bar ID Number	State
Visiting Attorney's mailing address, City, State and Zip		
violating Patient of Hamiling addresses, City, State and Exp		
Visiting Attorney's office telephone number	Visiting Attorney's Email address	
Name and address of the Bar(s) of which the Visiting Attor	rney is a member in good standing	
(4)		
PARTY INFORMATION		
Name of party represented		
SPONSORING ATTORNEY INFORMATION		
		WV
Name of Sponsoring Attorney and firm name	Bar ID Number	State
Sponsoring Attorney's mailing address, City, State and Zip	,	
Spansaring Attornay's office telephone number	Sponsoring Attorney's 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 and that I have never been convic	ted of a felony. 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
requirement for attorneys admitted pro hac	e vice.
Date	Signature of Visiting Attorney
(PONGODING	
SPONSORING	G ATTORNEY'S CERTIFICATION
I hereby certify that I am admitted t	o practice before the Supreme Court of Appeals of West Virginia,
I am a member in good standing of the Wes	st Virginia State Bar, and I am a member of the bar of this Court. I
further certify that I have an office for the pr	ractice of law in West Virginia, and I practice law primarily in West
Virginia. I agree that pleadings, notices, and	d other papers may be served on me in this case. I consent to being
the Sponsoring Attorney for the above-nan	ned Visiting Attorney and I shall hereafter sign and electronically
file all papers that require the signature of a	an attorney.
Date	Signature of Sponsoring Attorney