UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF WEST VIRGINIA

STATEMENT OF VISITING ATTORNEY
AND DESIGNATION OF LOCAL COUNSEL

| | AND DESIGNATION OF LOCAL COUNSEL | |
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| v. | | |
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| VISITING ATTORNEY INFORMATION | | |
| | | |
| Name of Visiting Attorney | Bar ID Number | State |
| Visiting Attorney's firm name | | |
| | | |
| Visiting Attorney's mailing address, City, State and Zip | | |
| Visiting Attorney's office telephone number | Visiting Attorney's Email address | |
| - | | |
| Name and address of the Bar(s) of which the Visiting Atto | orney is a member in good standing | |
| | | |
| PARTY INFORMATION | | |
| | | |
| Name of party represented | | |
| SPONSORING ATTORNEY INFORMATION | N | |
| <u> </u> | • | 14/37 |
| Name of Sponsoring Attorney and firm name | Bar ID Number | State |
| Sponsoring Attorney's mailing address, City, State and Z | ip | |
| | | |
| Sponsoring Attorney'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 convicted 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 vice.

I understand that attorneys admitted pro hac vice may register for service by electronic means pursuant to the Federal Rules, and for privileges to view official docket sheets and documents associated with cases and query case reports for cases on the CM/ECF system. I further understand that all filings must be electronically submitted by local counsel. Signature of Visiting Attorney Date 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 and electronically file all papers that require the signature of an attorney.

Date

Signature of Sponsoring Attorney