

11555 Heron Bay Blvd., Suite 200 Coral Springs, FL 33076 Telephone and Fax: (800) 231-9110 www.uslaw.org

APPLICATION FOR MEMBERSHIP

USLAW NETWORK, Inc. is an organization of independently owned and operated law firms located throughout the United States and internationally. Your application will be reviewed by members of the USLAW Executive Committee and Board of Directors for purposes of assessing whether your firm would be an appropriate and acceptable member of USLAW NETWORK. For further information about USLAW, we encourage you to visit our web site at www.uslaw.org.

It should be noted that if your firm is accepted into USLAW, you will be provided copies of USLAW By-laws. By signing this application, you agree to abide by the By-laws to maintain your membership in USLAW.

In the event further information is needed, please contact USLAW CEO, Roger M. Yaffe at (800) 231-9110.

- A. This Application is subject to acceptance by USLAW NETWORK, Inc. as provided by its Charter and By-laws.
- B. The practice of member firms often extends to geographic areas necessitated by the needs of their clients. USLAW will not restrict any member from practicing law

understands that:

wherever its client's desire representation permitted by law, even if its practice takes it into the geographical area of practice of another member firm.

C. Unless excluded by conflict of interest, the desires of clients, practicability or other important considerations, the Applicant agrees to cooperate with other member firms in enhancing each other's practice, achieving greater administrative and financial efficiency, and in handling mutual client matters uniformly and economically.

II. Please provide the NETWORK with the information requested below. It will be maintained in the strictest of confidence and used only for the purposes of determining whether the Applicant meets the membership criteria of USLAW. If it is more convenient to use additional pages or to use a substitute form, please feel free to do so.

A. Firm Information				
Firm Name				
Physical Address				
City	State	Zip		
Mailing Address (if different)				
City	State	Zip		
Telephone ()	_Fax (_)		
Web Site Address				
Name of Attorney Submitting Application				
Title or Position of Responsibility				
Direct Dial Telephone ()				
E-mail Address				
B. Is Your Firm a Corporation, Partnership Manner?	o or Operate	in Some	Other	Legal

	on and the number of attorneys			# - 5 ALL	
<u>City</u>			<u>State</u>	# of Attor	<u>neys</u>
				-	
				-	 :
				-	 :
D.	Is your firm planning to open	any	other offices,	merge with anot	her firm, or
expan	d to other city or state within th	he ne	xt 36 months t	o the extent this	information
can be	e disclosed? If yes, please expla	in:			
-					
E.	Describe your firm's managem	nent c	or governance s	structure and list	the names,
office	location (if appropriate) and p	ositio	ns of the attor	nevs in leadersh	ip positions
	your firm.			•	
VVICIIIII	your min.				
-					
_	Diagon list the number of name	+~~~	that have left	the firm during	aaab af +ba
F.	Please list the number of par			_	each of the
	following years and the reason	า(ร) พ	thy. List by yea	ır:	
2023:					

2022:
2021:
2021.
2020:
2019:
G. Is your firm (as opposed to individual attorneys) currently a member of any other legal NETWORK or association? If yes, please explain and provide the name of each NETWORK or association, with address and web site for each. Please outline the goals and objectives of the organization, the characteristics of membership, the date your firm joined, and what your expectations are as a member.
H. Has your firm ever been a member of any other legal NETWORK or association? If yes, please explain and provide the name of each NETWORK or association with address and web site for each.

I. Please provide the following numbers for e	each of your office locations:		
Primary Office Location:	City		
Total number of partners:			
If your firm has a multi-tier partnership program:			
Total number of shareholders/owners			
Total number of income partners:			
Total number of "Of Counsel":			
Total number of associates:			
Total number of paralegals:			
OFFICE TOTAL			
Additional Office Location #1:	City		
Total number of partners:			
If your firm has a multi-tier partnership program:			
Total number of shareholders/owners			
Total number of income partners:			
Total number of "Of Counsel":			
Total number of associates:			
Total number of paralegals:			
OFFICE TOTAL			
Additional Office Location #2:	City		
Total number of partners:			
If your firm has a multi-tier partnership program:			
Total number of shareholders/owners			
Total number of income partners:			
Total number of "Of Counsel":			
Total number of associates:			

Total number of paralegals:	
OFFICE TOTAL	
Additional Office Location #3:	City
Total number of partners:	
If your firm has a multi-tier partnership program:	
Total number of shareholders/owners	
Total number of income partners:	
Total number of "Of Counsel":	
Total number of associates:	
Total number of paralegals:	
OFFICE TOTAL	
Additional Office Location #4:	
	City
Additional Office Location #4:	
Additional Office Location #4: Total number of partners:	
Additional Office Location #4: Total number of partners: If your firm has a multi-tier partnership program:	
Additional Office Location #4: Total number of partners: If your firm has a multi-tier partnership program: Total number of shareholders/owners	
Additional Office Location #4: Total number of partners: If your firm has a multi-tier partnership program: Total number of shareholders/owners Total number of income partners:	
Additional Office Location #4: Total number of partners: If your firm has a multi-tier partnership program: Total number of shareholders/owners Total number of income partners: Total number of "Of Counsel":	

with position held) of any of the following organizations: DRI, State Bar Association, ABA, IADC, FDCC, or any other similar organizations.		
K. Please list below the percentage of your fir substantially concentrated in one of the following Appellate Law	·	
Banking and Financial Services		
Business Litigation/Class Actions		
Business Transactions/M&A		
Complex Tort and Product Liability		
Construction Law		
Data Privacy and Security		
Energy/Environmental		
Government Relations		
Insurance and Risk Management Services		
IP		
Labor and Employment		
Medical Law		
Real Estate		
Retail and Hospitality Law		
Professional Liability		
Tax Law		
Transportation and Logistics		
Trusts and Estates		
White Collar Defense		
Workers' Compensation		

Total	100%
Please list the top 10 nationale counsel and the type of wor	al or international self-insured clients for whom you rk provided to these clients.
<u>Client</u>	Type of Work
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
	insurance clients for whom you provide counsel and the
M. Please list the top 10	insurance clients for whom you provide counsel and the
M. Please list the top 10 type of work provided to the	insurance clients for whom you provide counsel and these clients. <u>Type of Work</u>
M. Please list the top 10 type of work provided to the Client	insurance clients for whom you provide counsel and these clients. <u>Type of Work</u>
M. Please list the top 10 type of work provided to theClient1.	insurance clients for whom you provide counsel and these clients. Type of Work
M. Please list the top 10 type of work provided to the Client 1	insurance clients for whom you provide counsel and these clients. Type of Work
M. Please list the top 10 type of work provided to the Client 1	insurance clients for whom you provide counsel and these clients. Type of Work
M. Please list the top 10 type of work provided to the Client 1 2 3 4 5	insurance clients for whom you provide counsel and these clients. Type of Work
M. Please list the top 10 type of work provided to the Client 1	insurance clients for whom you provide counsel and these clients. Type of Work
M. Please list the top 10 type of work provided to the Client 1 2 3 4 5	insurance clients for whom you provide counsel and these clients. Type of Work

corporate/transactional counsel and the type of	work provided to these clients.
<u>Client</u>	Type of Work
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
5% plaintiff's practice, please describe the natu P. Please list the top 15 clients that you wo	
NETWORK and its member firms and the title/p the company.	-
<u>Client</u>	<u>Title/Position</u>
1	
2	
3	
4	
5	
6	
7	
0	

Please list the top 10 national or international clients for whom you provide

N.

9		_		
10.		_		
11.		_		
12 13		_		
		_		
14.	_	_		
Q. you	For any of the clients noted above, provide counsel for these clients outside			e country where
				_
prof	Please list your firm's malpractice coverage? Attach to this Application fessional liability insurance and a copy fessional liability insurance policy(ies) f	n a cop of the	y of the firm's declaration page	last application foe from your curren
				_
S. pen	Please describe any grievance or m ding against your firm or attorneys in y	•		are currently

III. THE PROGRAM

Belonging to USLAW NETWORK, Inc. without active participation by members of a firm does not benefit the firm or USLAW to the extent desired. Please answer the following questions with yes or no.

A.	If your firm becomes a member of USLAW NETWORK, Inc. will at least two
mem	nbers of your firm regularly attend the two USLAW semi-annual client conferences?
	YES NO
В.	All USLAW member firms participate in the Comprehensive Client Invitation
Proc	ess (CCIP). This process requests member firms to submit client contacts for
cons	ideration to be invited to the Client Conferences, Forums, Exchanges, and
Wom	nen's Connection. These clients are then reviewed by leaders of the USLAW
prac	tice groups and staff to determine the clients that will be invited to each event.
Will	your firm actively participate in CCIP?
	YES NO
C.	Is your firm willing to take an active role of the kind described above and submit
initia	ally no fewer than 10 clients and 5 new clients annually with the ability to assign
busii	ness on a national, international or multi-regional basis?
	YES NO
D.	USLAW hosts several other events and meetings. These events are not required
atter	ndance by USLAW member firms however firms will be evaluated based on their
over	all participation. Will your firm actively engage in these events where they fit with
your	firm's practice group make up and business development initiatives?
	YES NO
E.	USLAW hosts several other events and meetings. These events are not required
atter	ndance by USLAW member firms however firms will be evaluated based on their
over	all participation. Will your firm actively engage in these events where they fit with
your	firm's practice group make up and business development initiatives?
	YES NO
F.	We have found that it is important for lawyers throughout each firm, as

distinguished from just a few, to know about USLAW, its programs, members, and projects. Will your firm identify critical partners with client development skills and

cooper in USL	rate with the NETWORK in seeing to it that .AW?	those partners active	ely participate
		YES	NO
G.	USLAW tracks business flow among the	member law firms and	d requires each
firm to	o submit this information on a semi-annua	l basis. Financial infor	mation is never
reques	sted. If your firm joins USLAW will it be wil	ling to participate in t	his process?
		YES	NO
н.	Managing Partners of member firms are a	actively involved in the	e USLAW Law
Firm L	eaders/Managing Partner Forum. Participa	tion in this group enal	bles firms to
share	best practices and benchmarking informat	ion. USLAW firms that	have
manag	ging partner involvement are more investe	d in the organization.	Will your firm's
manag	ging partner be an active participant in USI	_AW?	
		YES	NO
I.	Will your firm respond in a timely fashion	(within 48 hours) to a	all e-mail and
	telephone inquiries from USLAW staff rela	ated to the various iss	ues that might
	develop in the USLAW organization?		
		YES	NO
J.	Will your firm pay all USLAW invoices with	hin 30 days of receipt	?
		YES	NO

IV. Primary and Alternate Contact Partners

USLAW requires each member firm to have a primary contact partner and two alternate contact partners. It is suggested that at least one of the persons designated be a firm managing partner or on the firm management committee. As well, USLAW asks each member firm to consider the importance of diversity when assigning their contact partners.

Please state the name and position of the Primary Contact Partner and (2) Alternate Contact Partners that you intend to designate for USLAW and provide a **short bio** on each attorney.

Primary Contact	
Alternate Contact #1	
Alternate Contact #2	

V. Practice Group Contacts

USLAW encourages active participation in the USLAW practice areas as much of the relationship building and business development occurs within these groups. Member firms are requested to become active in as many areas that match well with their firm. Firms are not required to be active in all USLAW practice areas.

Please list below the practice areas the firm intends to be initially active in and the name of the attorney that will serve as the main contact.

Appellate Law	
Banking and Financial Services	
Business Litigation/Class Actions	
Business Transactions/M&A	
Complex Tort and Product Liability	
Construction Law	
Data Privacy and Security	
Energy/Environmental	
Government Relations	
Insurance and Risk Management Services	
IP	

Labor and Employment	
Medical Law	
Real Estate	
Retail and Hospitality Law	
Professional Liability	
Tax Law	
Transportation and Logistics	
Trusts and Estates	
White Collar Defense	
Workers' Compensation	
As USLAW continues to grow and look to the principles upon which the NETWORK was founded provide high quality legal representation to major businesses across the United States and around the network, it is imperative that our organization is of diversity of the communities in which we serve in commitments to client services. As members of a USLAW, its members and its clients, must take the be more inclusive of differences. While much has a diversity, USLAW however embraces diversity for is on the forefront of legal organizations that not of USLAW NETWORK has a comprehensive Diversity as they relate to the individual firms, our practice will your firm be an active participant in US	The commitment of member firms is to corporations and to both large and small he world. Thus, as a national and global comprised of individuals that mirror the keeping with our organization's diverse culture, organizations such as e lead and have an obligation to society to been made of the business case for more than economical expediency. USLAW only talk about diversity but also live it. initiative that addresses diversity issues groups, our membership, and our clients
VII. Please describe your firm's commitment to demonstrate this commitment.	diversity and any specific initiatives that

VIII. Please describe in a paragraph why your firm should be considered for inclusion in USLAW. Feel free to describe any attributes of your firm or information about your firm or attorneys in your firm that you believe the selection committee should consider in our evaluation of your membership application. If you feel that your web site does not provide a full account of the nature of your firm and wish to attach a firm brochure for consideration by USLAW, please attach same to your application.

APPLICATION PREPARED THIS	DAY OF	
BY:		
Partner/Shareholder (signature):		
Partner/Shareholder (type/print):		
Position:	Firm	