

YOUNG LAWYERS DIVISION, AMERICAN BAR ASSOCIATION  
**DISASTER LEGAL SERVICES**  
**VOLUNTEER ATTORNEY APPLICATION**  
*(Legal services are delivered under terms of agreement between ABA/YLD and FEMA)*

The American Bar Association Young Lawyers Division and the Federal Emergency Management Agency have established the Disaster Legal Services Hotline (the "DLS Hotline"). The DLS Hotline is a call center where victims from the declared Major Disaster can call to access legal services and educational information. The DLS Hotline seeks attorneys admitted to practice in California to participate in answering or returning calls from the DLS Hotline. As well, the DLS Hotline will collect and forward to appropriate referral sources information from attorneys who wish to serve as pro bono counsel for victims. As part of the DLS Hotline's efforts, we will only accept lawyers who can agree to the representations below:

**As a volunteer lawyer for the DLS Hotline, I agree:**

1. That I am a member in good standing of the State Bar of California.
2. That neither I nor my law firm will solicit or accept any lawyer's fee (including any referral fee) from any caller to the DLS Hotline, nor will we accept any fee for any other legal services provided to a caller referred to us by the DLS Hotline.

*By execution of this application, the undersigned attorney represents that s(he) meets or will follow all of the foregoing criteria, agrees to the foregoing obligations, and will not accept, for a fee, any cases initiated through the DLS Hotline.*

\_\_\_\_\_  
Name \_\_\_\_\_  
State Bar No.

\_\_\_\_\_  
Street Address \_\_\_\_\_  
City Zip Code

\_\_\_\_\_  
Telephone No. \_\_\_\_\_  
Fax No.

\_\_\_\_\_  
Cellular Telephone No. \_\_\_\_\_  
Email Address

Languages Spoken: \_\_\_\_\_

Area of Legal Specialty or Expertise: \_\_\_\_\_

- I am willing to staff the DLS Hotline in San Diego. Yes No  
I am willing to return 5-10 calls placed to the DLS Hotline. Yes No  
I am willing to staff a Disaster Relief Center located in an affected county. Yes No  
I am willing to volunteer to provide ongoing pro bono representation to victims. Yes No  
I prefer to receive communications by: Fax Email  
I carry Legal Malpractice Insurance. Yes No

\_\_\_\_\_  
Signature

**Please return this completed application form to:**  
**Joel Villaseñor, Sullivan Taketa LLP, 31351 Via Colinas, Suite 205,**  
**Westlake Village, CA 91362 or FAX to (818) 889-4497 or email to**  
**joel.villasenor@calawcounsel.com**