UNITED STATES DISTRICT COURT
DISTRICT OF SOUTH CAROLINA

Application for Mediators

Please complete the entire application, using additional paper if necessary. You may also attach a resume.

Name: Lawrence E. Richter, Jr.

Firm or Office Name: The Richter Firm, P.A.

Office Address: P.O. Drawer 1089 Mt. Pleasant, SC 29465

Office Phone: (843)849-6000 Office Fax: (843)881-1400

email address: lerichter@richterfirm.com

ADMISSIONS AND AFFILIATIONS

Date admitted to the Bar of the District of South Carolina: 1971 I.D. No.: 3460

Date admitted to the South Carolina Bar: 1971 Bar No.: 4724

Other courts or jurisdictions to which admitted (with dates of admission and bar nos.): U.S. Supreme Court

Membership and positions held in bar, ADR and professional associations: SC Bar Association, SC Trial Lawyers Association

Are you a member in good standing in each jurisdiction where admitted to practice law? x yes ___ no

Are you currently the subject of any pending disciplinary proceeding in any jurisdiction? ___ yes X no

Have you, within the last 5 years, been denied admission to a bar for character or ethical reasons or disciplined for professional misconduct? ___ yes x no

EDUCATION

Year law degree received 1971 Law School University of South Carolina

Other professional degrees received (including year and school)

LEGAL EXPERIENCE (A minimum of 5 years of law practice required)

Summarize legal experience (including teaching) since admission to the bar, particularly in the past five years:

Extensive trial practice including a significant amount of complex litigation. Five years municipal judge, two years Family Court Judge, six years Circuit Court Judge

Percentage of practice in last 5 years representing plaintiff 80 % or defense 20 %

Percentage of Federal or State court practice in last 5 years: Federal 25 % State 75 %

Number of years engaged in active litigation: 30

EXPERTISE

Indicate all substantive areas in which you have expertise. Place a "1" by your strongest area(s) and a "2" by all other areas in which you have expertise. (Do not rank beyond "1" and "2.") After any category you have marked, please identify any sub-areas of expertise you have (e.g. "medical malpractice" after Personal Injury).

____ Admiralty	____ Security or Shareholders suits
____ Antitrust	____ Labor
2 Contracts	____ ERISA
____ Environment	____ Wrongful Termination
2 Fraud or Civil RICO	____ Civil Rights in Employment
2 Insurance	____ Other Civil Rights
____ Miller Act	____ Copyrights
1 Personal Injury	____ Patent
1 Product Liability	____ Trademark
____ Other (specify)____	

Publications: ____

MEDIATION EXPERIENCE

Mediation experience (particularly in the subject matter categories above): As a judge I "mediated" a very large number of cases over the years. I have recently been certified in South Carolina.

Other courts or organizations for whom you serve as a mediator (please note any certifications): S.C. certified mediator, numerous as judge and pro bono

Number of mediations conducted: 1 Number of other ADR sessions conducted: ____

MEDIATION AND OTHER ADR TRAINING

Course Provider	Course Content	Date	Place	No. of Hours
SCCCR	Civil Court Mediation Training	12/8/00	Columbia, SC	40 hours

OTHER INFORMATION

Are you familiar with the statutes, rules and practice governing alternative dispute resolution in the District of South Carolina? X yes ____ no

Other relevant experience or skills or other information you would like considered in connection with this application:

Thirteen years judicial service

Cities in which you are available to conduct mediation:

X Columbia X Charleston X Greenville X Florence

Other Statewide

Fees charged:

Hourly Rate: $ 250 Minimum charge each mediation:$ ____

How do you bill for travel? (explain): Portal to portal half rate

I agree to: (1) Be subject to the Rules of Professional Conduct, Rule 407, South Carolina Appellate Court Rules; the Rules for Lawyer Disciplinary Enforcement, Rule 413, South Carolina Appellate Court Rules; and the Local Rules of the District Court; (2) Provide mediation to indigents without pay if ordered by the Court; (3) Notify the Alternative Dispute Resolution Program Director of any change in the above facts or otherwise in my ability to perform duties as a mediator; (4) Disclosure of information contained in this application to litigants and other members of the public.

I certify that the foregoing is true and correct.

Signature: ____ Date: June 12, 2001
Applicant

Return completed application to:
Danny H. Mullis, Director
Alternative Dispute Resolution Program
United States District Court
Post Office Box 835
Charleston, SC 29402-0835

Reviewed: ____ Date: 6/14/01
ADR Program

Approved: ____ Date: 6/18/01
U.S. District Judge

3/2000