

Please keep a copy of this application for your records.

The Florida Bar Lawyer Referral Service

Membership Application 1646079

The Florida Bar Lawyer Referral Service • 651 East Jefferson Street • Tallahassee, Florida 32399-2300
800/842-8060, extension 5807, 5718 or 5810

Name (Mr. Ms.): Robert W. Bauer Florida Bar Attorney Number: 11058
Firm Name: Clayton-Johnston, P.A.
Office Mailing Address: P.O. Box 23939
City/State/Zip: Gainesville, Fl 32602 Phone: (352) 376-4694
E-Mail Address: RBauer@clayton-johnston.com

FOR DADE COUNTY ATTORNEYS ONLY Please indicate the area of Dade County in which your office is located. (North Miami, South Miami, North Miami Beach, Miami Beach, Downtown, Hialeah, Coral Gables, Homestead, Perrine, Kendall, Cutler Ridge, etc.): _____

Are there, or have there ever been in this state or elsewhere, any felony convictions, disbarments, suspensions or disciplinary actions against you?

yes no (If the answer is "YES," please give details on a separate sheet.)

Are you certified by The Florida Bar in any area of law?

yes no (Please specify): _____

Other current professional degrees or licenses: _____

Other states in which you are currently admitted to practice: N/A

Other countries in which you are currently admitted to practice: N/A

Other Florida counties from which you will handle cases:
Third and Eighth Judicial Circuits
Marion County

Will you take cases statewide? yes no

Will you make jail calls? yes no

Do you know sign language? yes no

Does anyone on your staff know sign language? yes no

Foreign languages spoken by you: N/A

Foreign languages spoken by your staff: N/A

I certify that I am currently competent to practice in the areas of law which I have indicated. Under penalty of perjury, I hereby swear and affirm that I have read and agree to abide by the rules and regulations of The Florida Bar Lawyer Referral Service. Enclosed is my check for \$125 (made payable to The Florida Bar) for the annual membership fee and a copy of the current face sheet/declarations page of my professional liability insurance policy.

I certify that I currently have professional liability insurance with limits not less than \$100,000 and will continue to carry professional liability insurance with limits not less than \$100,000 as long as I am a member of The Florida Bar Lawyer Referral Service.

I agree to remit to the Service 12% of any attorneys' fees due me for services performed in connection with any Regular Panel cases (Bankruptcy and Social Security cases are exempt).

I agree to charge no more than \$25.00 for the initial half-hour office consultation.

I understand that this application is made only on my behalf and not on behalf of my firm or any of my associates. Accordingly, I agree that the initial consultation in connection with any referred matter will be with me personally. I understand that the information contained herein may be furnished to people who seek assistance from the Service, and that the Service in so doing will be relying on the representations which I have made herein.

I agree to abide by all of the rules of the Service and indemnify and hold harmless The Florida Bar and any of its officers, members or employees from any and all claims, demands, actions, liability or loss which may arise from, or be incurred as a result of the operation of the Service or referrals of clients through the Service, or by my failure to comply with any provision of the rules of the Service, or use of information contained in the application.

I understand that the Service may survey clients referred to me and may follow up on reported cases.

Signature Robert W. Bauer

Date 4/22/05

Please mail the completed application, your \$125.00 check, and a copy of your current professional liability insurance declarations page to:

The Florida Bar Lawyer Referral Service
651 East Jefferson Street
Tallahassee, Florida 32399-2300

FILED
5-17-05

CATEGORIES OF LAW

Please indicate below each area of law for which you request referrals and in which you are currently competent, experienced and trained to practice (please limit it to no more than 56 areas of law):

	OPTIONAL PANELS			OPTIONAL PANELS		
	Regular Panel	Low Fee	Elderly	Regular Panel	Low Fee	Elderly
ADMINISTRATIVE/GOVERNMENT						
Administrative (01)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Dept. of Children and Families Legal Matters (AFDC, Foster Care, Child Abuse, Welfare, etc.) (02)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Licensing (03)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Medicare/Medicaid (04)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Military/Veteran's Benefits (05)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
School Law/Education (06)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Social Security (07)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Social Security Disability (08)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Workers' Compensation - Federal (08)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Workers' Compensation - State (09)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Unemployment Compensation (09)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
BUSINESS						
Anti-Trust (11)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Bankruptcy - Corporate (12)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Business (Contracts, etc.) (13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Collections (14)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Commercial Litigation (15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Copyrights/Trademarks (16)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Franchise Law (17)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Patents (18)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Securities (19)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
CONSTITUTIONAL LAW/INDIVIDUAL RIGHTS						
First Amendment Issues (20)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Baker Act (22)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Civil Rights - General (25)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
a. Age Discrimination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
b. Racial/Ethnic Discrimination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
c. Gender Discrimination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Please specify other civil rights areas:						
Americans With Disabilities Act (ADA) (26)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
False Arrest/Police Brutality (27)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Harassment (25)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Sexual Harassment (28)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
CONSUMER						
Consumer Collections (31)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Consumer (General - Contracts, Warranties, etc.) (32)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Banking Law (33)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Consumer Credit/Repossessions/Garnishment (34)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Insurance Law (36)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Lemon Law (37)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Personal Bankruptcy (38)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
CRIMINAL						
DUI (41)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Felony (42)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Domestic Violence (43)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Juvenile - Criminal (44)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Misdemeanor (45)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Traffic Infractions/License Suspensions (48)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Parole/Probation (49)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
FAMILY LAW						
Family Law - General (50)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Adoption (51)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Child Custody/Visitation (53)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Child Support (54)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Dissolution/Separation/Annulment (55)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Guardianship (56)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Juvenile - Miscellaneous (57)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Name Change (58)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Paternity (59)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
REAL PROPERTY						
Condominium Law (61)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eminent Domain/Condemnation (62)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homeowner's Association (63)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Landlord/Tenant (64)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please specify either landlord or tenant:						
Mobile Home Law (65)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mortgage Foreclosure (66)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Real Estate (General - Purchase/Sale of Property, Contracts, etc.) (67)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Zoning/Land Use (69)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TORTS (REFERRALS ON REGULAR PANEL ONLY)						
Dental Malpractice (70)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fraud (71)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal Malpractice (72)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Libel and Slander (73)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Malpractice (74)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Malpractice (75)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please specify types of other malpractice:						
PI - Defense (76)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PI - Plaintiff (77)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Products Liability (78)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Property Damage (79)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automobile Accidents (80)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WILLS/PROBATE						
Wills (81)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guardianship (83)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Living Trusts (84)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Living Will (85)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Probate (86)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Simple Wills (87)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trusts/Estates/Estate Planning (88)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MISCELLANEOUS						
Admiralty (101)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appeals - Civil (102)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appeals - Criminal (103)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agriculture (104)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aviation Law (105)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Law (106)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Construction Law (107)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customs (108)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entertainment and Sports Law (109)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Law (110)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Practice (111)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elder Law (112)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Immigration Law (113)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
International Law (114)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Labor Law (115)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please specify either employee or employer:						
Pension Law (116)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Property (97)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taxation (118)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I will provide a FREE consultation in the following areas of law:						

Other categories not covered above: _____						

Areas of special interest/expertise: _____						



Created by The Florida Bar for its members.

*This is a Claims Made Policy. Please read it carefully.
Lawyers Professional Liability Policy*

Declarations

Policy Number: 96100034
Territory: 2

Item 1. Named Insured: Clayton-Johnston, P.A.

Mailing Address: 18 N.W. 33 Court
Gainesville, Florida 32607-2553

Item 2. Policy Period: From 04/01/2006 to 04/01/2007 at 12:01 A.M.
Standard Time at Your Address Above

Item 3. Limit of Liability: \$3,000,000 per claim
\$3,000,000 total limit

Item 4. Deductible: \$10,000 annual aggregate

Item 5. Premium: \$33094

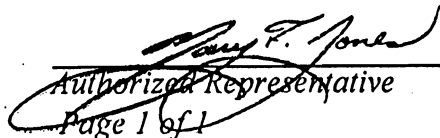
Item 6. Forms and Endorsements Attached at Policy Issuance

FLPL-101(R.07-01-2005) FLPL-200R(R.3-1-2005) FLPL-103(R.1-1-2001)
FLPL-104(R.9-1-96)

THIS POLICY IS NOT VALID UNTIL SIGNED BY OUR AUTHORIZED REPRESENTATIVE

March 30, 2006

Countersignature Date
FLPL-100(R.1-1-1997)


Authorized Representative
Page 1 of 1



Insurance Company®

Created by The Florida Bar for its members.

*This is a Claims Made Policy. Please read it carefully.
Lawyers Professional Liability Policy*

RETROACTIVE DATE SCHEDULE ENDORSEMENT

Named Insured

Clayton-Johnston, P.A.

Policy Number: 96100034 *Endorsement Number:* 1 *Effective Date:* 04/01/2006

It is hereby understood and agreed that coverage is provided to the lawyers listed herein for acts, errors or omissions or personal injuries which occurred on or after the **Retroactive Date** shown below:

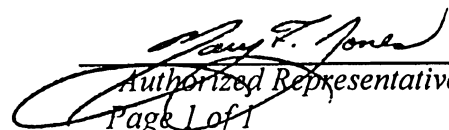
<u>Name</u>	<u>Retroactive Date</u>
Robert W. Bauer	04/22/2005
Thomas G. Christmann	05/15/2003
James E. Clayton	04/01/1996
Charles M. Gadd	04/01/1996
Leonard E. Ireland, Jr.	04/01/1996
Charles Thomas Pino	08/23/2004
James S. Quincey	04/01/1996
Lydia M. Quinn	03/01/2003

Nothing herein shall be held to vary, alter, waive or extend any of the terms, conditions, provisions, agreements or limitations of the above numbered policy, other than as stated in this endorsement.

March 30, 2006

Countersignature Date

PT-103 (R 1-1-2001)


 Authorized Representative
 Page 1 of 1

CLAYTON-JOHNSTON, P.A.

352-376-4694
Fax: 352-371-7366
1-800-454-3476

Fax Cover Sheet

To: Edith Trotman, Program Assistant, **Date:** May 17, 2005
Publick Service Programs

From: Robert W. Bauer Esq. **Pages:** 1

Subject: Fla. Bar Referral Categories of **Matter**
Law **No:**

Fax to: 850-561-5818

COMMENTS:

My Address information has been updated online. Please confirm that you will be sending referrals to the firm and not my home address. My wife is at home asleep after working all night and probably wouldn't appreciate the calls. Thanks for your help and prompt attention to my requests.

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, OR THE EMPLOYEE OR AGENT RESPONSIBLE FOR DELIVERING THE MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE, AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE UNITED STATES POSTAL SERVICE. THANK YOU



The Florida Bar

JOHN F. HARKNESS, JR.
EXECUTIVE DIRECTOR

651 EAST JEFFERSON STREET
TALLAHASSEE, FLORIDA 32399-2300

850/561-5600
www.FLABAR.org

May 19, 2005

Robert Bauer
PO Box 23939
Gainesville, FL 32602

Dear Mr. Bauer:

It is a pleasure to welcome you to membership on The Florida Bar Lawyer Referral Service panel.

To help you better understand the operating procedures of the service, I have enclosed several items which I hope will be helpful to you.

C
O
P
Y

- 1) Lawyer Referral Service Operating Procedures: This sets forth the basic procedure for making referrals and outlines various reports.
- 2) Referral Form: This is the form that is produced when a referral is made. Each Friday we will forward to your office the forms for all the referrals made to you that week (the prior Friday through Thursday). The forms are perforated so you may place the individual referral forms in the client's file if a case file is opened. This will identify the file as a Florida Bar Lawyer Referral Service case. The weekly forms are for your information only and are to be retained by your office.
- 3) Client Survey Form: This is sent to 20-30% of the people who are referred by the service (selected randomly). A label with the referred attorney's name is attached to the top of the survey.

In addition to the weekly referral forms, each month you will receive a computer printout which lists all referrals made the previous month and all outstanding, pending and unreported cases previously referred. The Monthly Outstanding Report is used to report to us the status of all cases referred and to return any fees due the referral service. Please include the computer report with any fees due the referral service.

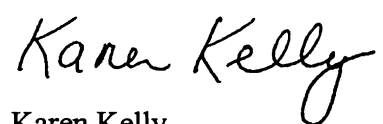
PLEASE BE ADVISED THAT BANKRUPTCY AND SOCIAL SECURITY CASES ON THE REGULAR REFERRAL PANEL ARE EXEMPT FROM THE 12% REMITTANCE FEE REQUIREMENT.

May 19, 2005

Page 2

If you have any questions concerning the service, please do not hesitate to contact me at 800-342-8060, extension 5810, or at kkelly@flabar.org. Again, we welcome you to panel membership and look forward to working with you.

Sincerely,

A handwritten signature in cursive script that reads "Karen Kelly".

Karen Kelly
Director
Public Service Programs

KK/eb:X104

Enclosures: Referral Form, Lawyer Referral Service Operating Procedures,
Client Survey Form

CLAYTON-JOHNSTON, P.A.

352-376-4694
Fax: 352-371-7366
1-800-454-3476

Fax Cover Sheet

To: Edith Trotman, Program Assistnat, **Date:** 27 January 2006
Public Service Programs

From: Robert W. Bauer, Esq. **Pages:** 2 (including cover page)

Subject: "Categories Of Law" Form **Matter No:**

Fax to: (850) 561-5818

COMMENTS:

PLEASE SEE ATTACHED: "Categories of Law Form completed by Robert W. Bauer, Esq. Please update your records accordingly. Thank you.

PLEASE NOTE: Mr. Bauer does NOT do:

- Family Law
- Medical Malpractice
- Auto Contracts/Lemon Law
- Police Abuse Cases

Mr. Bauer does provide free consultations regarding Personal Injury matters.

Also, please note that our address has changed to the following:

CLAYTON-JOHNSTON, P.A.
Robert W. Bauer, Esquire
18 NW 33rd Court
Gainesville, FL 32607

Handwritten: [Signature] 1-27-06

Sincerely,

Handwritten Signature: Dea Evans
Dea Evans, Legal Assistant to
Robert W. Bauer, Esquire

Handwritten: 11058

Handwritten: C

CATEGORIES OF LAW

Please indicate below each area of law for which you request referrals and in which you are currently competent, experienced and trained to practice (please limit it to no more than 36 areas of law):

	OPTIONAL PANELS		
	Regular Panel	Low Fee	Elderly
ADMINISTRATIVE/GOVERNMENT			
Administrative (01)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dept. of Children and Families Legal Matters (AFDC, Foster Care, Child Abuse, Welfare, etc.) (02)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Licensing (03)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicare/Medicaid (04)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Military/Veteran's Benefits (05)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Law/Education (06)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Security (07)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Security Disability (08)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workers' Compensation - Federal (09)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workers' Compensation - State (09)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unemployment Compensation (09)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BUSINESS			
Anti-Trust (11)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bankruptcy - Corporate (12)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Business (Contracts, etc.) (13)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Collections (14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commercial Litigation (15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copyrights/Trademarks (16)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Franchise Law (17)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patents (18)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Securities (19)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CONSTITUTIONAL LAW/INDIVIDUAL RIGHTS			
First Amendment Issues (20)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baker Act (22)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Civil Rights - General (25)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Age Discrimination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Racial/Ethnic Discrimination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Gender Discrimination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please specify other civil rights areas: _____			
Americans With Disabilities Act (ADA) (26)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
False Arrest/Police Brutality (27)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Harassment (28)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Harassment (29)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CONSUMER			
Consumer Collections (31)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer (General - Contracts, Warranties, etc.) (32)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Banking Law (33)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Credit/Repossessions/Garnishment (34)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insurance Law (38)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lemon Law (37)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Bankruptcy (38)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CRIMINAL			
DUI (41)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Felony (42)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domestic Violence (43)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Juvenile - Criminal (44)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Misdemeanor (40)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Traffic Infractions/License Suspensions (46)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parole/Probation (49)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FAMILY LAW			
Family Law - General (50)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adoption (51)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Custody/Visitation (53)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child Support (54)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dissolution/Separation/Annulment (55)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guardianship (56)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Juvenile - Miscellaneous (57)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name Change (58)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paternity (59)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	OPTIONAL PANELS		
	Regular Panel	Low Fee	Elderly
REAL PROPERTY			
Condominium Law (61)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eminent Domain/Condemnation (62)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homeowner's Association (63)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Landlord/Tenant (64)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please specify either landlord or tenant: _____			
Mobile Home Law (65)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mortgage Foreclosure (66)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Real Estate (General - Purchase/Sale of Property, Contracts, etc.) (67)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Zoning/Land Use (69)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TORTS (REFERRALS ON REGULAR PANEL ONLY)			
Dental Malpractice (70)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fraud (71)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Legal Malpractice (72)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Libel and Slander (73)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Malpractice (74)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Malpractice (75)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please specify type of other malpractice: _____			
PI - Defense (76)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PI - Plaintiff (77)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Products Liability (78)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Property Damage (79)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automobile Accidents (80)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WILLS/PROBATE			
Wills (81)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guardianship (83)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Living Trusts (84)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Living Will (85)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Probate (86)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Simple Wills (87)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trusts/Estates/Estate Planning (88)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MISCELLANEOUS			
Admiralty (101)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appeals - Civil (102)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appeals - Criminal (103)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agriculture (104)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aviation Law (105)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Law (106)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Construction Law (107)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customs (108)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entertainment and Sports Law (109)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Law (110)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Practice (111)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elder Law (112)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Immigration Law (113)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
International Law (114)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Labor Law (115)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please specify either employee or employer: _____			
Pension Law (116)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Property (87)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taxation (118)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Animal Law (119)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I will provide a FREE consultation in the following areas of law: <u>Personal Injury</u>			
Other categories not covered above: _____			
Areas of special interest/expertise: _____			