



Statement of Qualifications and Expression of Interest

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Please answer all fields. Omission of an item may preclude you from being considered. Please provide additional information related to your qualifications on additional sheets.

GENERAL INFORMATION

FIRST Name

TODAY'S DATE (00/00/0000)

LAST Name

E-mail

Street address

Street address line 2

City

State

Zip code

Phone Number

Alternate Phone Number

LAW FIRM OR GOVERNMENT AGENCY AFFILIATIONS

(from date of admission or 2000, whichever is more recent)

Name and Location (City, State) of Law Firm

From

To

Name and Location (City, State) of Law Firm or Agency

From

To

**EXAMPLES OF WORK TYPE
AMOUNTS OF FEES AND COSTS CHARGED**

"Reasonable Costs" is an insufficient response.
Please enumerate and attach additional sheets, if necessary.

Type of Work

Fees Charged

Costs

Type of Work

Fees Charged

Costs

Type of Work

Fees Charged

Costs

AREAS OF PROFICIENCY

From the list of areas of practice sought by the City Council, please list up to three (3)
areas of law practice in which you consider yourself
proficient and for which you wish to be considered:

1.

2.

3.

For each area of proficient practice listed above, please provide:

- a. An estimate total number of cases or matters handled; and
- b. A brief representative sample of work performed. For each representative case or matter described, indicate the client for whom the work was performed, when the work was performed, the court in which appearances, if any, were made, and citations to reported cases, as appropriate. Attach additional sheets, if necessary.

Area(s) of Proficiency

SPECIAL COUNSEL, DEPUTY CORPORATION COUNSEL, OR OTHER CONTRACTS

Please provide a list of Special Counsel or Special Deputy Corporation Counsel contracts, or other contracts entered into by you or your law firm to perform legal services on behalf of the City and County of Honolulu, including the dates of the contracts, for the last 10 years. If none, please indicate "none."

List of Special Counsel, Special Deputy Corporation Counsel, or other contracts:

DIRECT OR INDIRECT CONFLICTS OF INTEREST

Are you currently representing, or have you in the past represented, a party whose interest is adverse to the City Council of the City and County of Honolulu?

(If the answer is 'yes', on an attached sheet, please clearly identify the adverse matters and the nature of your involvement.)

Yes

No

CERTIFICATION BY APPLICANT

I hereby certify that all statements in this Statement of Qualifications and Expression of Interest, including its attachments (if any) are true and correct to the best of my knowledge as of the date of this signing.

Signature of Applicant

Date

**ALL MATERIALS MUST BE EMAILED TO THE FOLLOWING ADDRESS:
ocs@honolulu.gov**

HARD COPIES, CDs, and USBs WILL NOT BE ACCEPTED.