# UNITED STATES DISTRICT COURT DISTRICT OF SOUTH CAROLINA

#### CERTIFIED MEDIATOR INFORMATION UPDATE FORM

| Name: Edward K. Pritchard, III  |
|---|
| Firm or Office Name: Pritchard Law Group, LLC   |
| Office Address: 8 Cumberland Street, Suite 200  |
| Office Phone: (843) 722-3300 Office Fax: (843) 722-3379   |
| E-mail Address: epritchard@pritchardlawgroup.com  |
| Cities in which you are available to conduct mediation:   |
| Columbia: X Charleston: X Greenville: X Florence: X   |
| Other: Anywhere inside or outside of South Carolina.  |
| Fees charged: \$250.00 file set up fee  |
| Hourly Rate: \$\frac{400.00}{\text{Minimum charge each mediation:}}\$\frac{\\$1,200.00}{\text{Ninimum charge each mediation:}}\$  |
| How do you bill for travel? (explain): No charge for travel in the Charleston Area - Charleston, Dorchester or Berkeley County, except mileage at IRS rate if more than ten miles from my office. |
| Outside the Charleston Area, \$250.00 per hour for actual travel time plus mileage at IRS rate and any other actual expenses incurred, such as lodging, etc.                                      |

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 Coordinator 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 form to litigants and other members of the public.

I certify that the foregoing is true and correct. Signature /s/Edward K. Pritchard, III

Date: August 6, 2020

Certified Mediator

Return completed update form to:
Billie Goodman, Coordinator
Alternative Dispute Resolution Program
United States District Court
901 Richland Street
Columbia, SC 29201

Email: Billie\_goodman@scd.uscourts.gov Facsimile: (803) 253-3591

# 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: Edward K. Pritchard, III   |
| Firm or Office Name: Sinkler & Boyd, P.A.  |
| Office Address: 160 East Bay Street, Charleston, South Carolina 29401  |
| Office Phone: (803) 722-3366 Office Fax: (803) 722-2266  |
| ADMISSIONS AND AFFILIATIONS  |
| Date admitted to the Bar of the District of South Carolina: 10/25/88 I.D. No.: 4790  |
| Date admitted to the South Carolina Bar: 11/23/87 Bar No.: 009710  |
| Other courts or jurisdictions to which admitted (with dates of admission and bar nos.):  |
| Membership and positions held in bar, ADR and professional associations:   |
| Are you a member in good standing in each jurisdiction where admitted to practice law? X yesno   |
| Are you currently the subject of any pending disciplinary proceeding in any jurisdiction?yesX_no   |
| Have you, within the last 5 years, been denied admission to a bar for character or ethical reasons or disciplined for professional misconduct?yesX_no  |
| EDUCATION  |
| Year law degree received 1987 Law School Law |
| Other professional degrees received (including year and school)  Bachelor of Science in Business Administration, 1984, University of South Carolina  |
| 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:  Law Clerk to the Honorable Randall T. Bell, 8/87 - 8/88  |
| Sinkler & Boyd, P.A., Associate, 8/88 - 1/95   |
| Sinkler & Boyd, P.A., Partner, 1/95 - Present  |
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|   | ν <del>,</del>                     |  |                              |                          |
|---|------------------------------------|--|------------------------------|--------------------------|
| Percentage of practice in last 5 y  | ears representing plaintif         | f 40 % or defense 60   | .%                           |                          |
| Percentage of Federal or State co   | ourt practice in last 5 year       | rs: Federal 20 % States  | <u>80</u> %                  |                          |
| Number of years engaged in activ  | ve litigation: 8                   |  |                              |                          |
| EXPERTISE   |                                    |  |                              |                          |
| Indicate all substantive areas in wother areas in which you have explease identify any sub-areas of e | pertise. (Do not rank bey          | ond "1" and "2.") After ar   | ny category you hav          | "2" by all<br>/e marked, |
| Admiralty   | 2<br>2<br>2                        | Security or Shareholders Labor ERISA Wrongful Termination Civil Rights in Employn Other Civil Rights Copyrights Patent Trademark |                              |                          |
| Publications:   |                                    |  |                              |                          |
| MEDIATION EXPERIENCE  Mediation experience (particular  | rly in the subject matter of       | rategories above):N //   | A                            |                          |
| Other courts or organizations for   | r whom you serve as a m            | ediator:   |                              |                          |
| Number of mediations conducted  | d:1                                | N.   |                              |                          |
| MEDIATION TRAINING  |                                    |  |                              |                          |
| Course Provider SCCMADR   | Course Content  Mediation Training | <u>Date</u><br>. April 25–29,  | <u>Place</u><br>96 Columbia, | No. of<br>Hours<br>SC 40 |
| 000000  |                                    |  |                              |                          |
|   |                                    |  |                              |                          |
|   |                                    |  |                              |                          |

| OTHER INFORMATION  |  |  |
|--|--|--|
| Are you familiar with the statutes, rules and practice governing mediation conferences in the District of South Carolina? X yesno  |  |  |
| Other relevant experience or skills or other information you would like considered in connection with this application:  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Cities in which you are available to conduct mediation:  |  |  |
| X Columbia X Charleston Greenville X Florence  |  |  |
| Other  |  |  |
| Fees charged:  |  |  |
| Hourly Rate: \$ 150.00 Minimum charge each mediation:\$ 150.00   |  |  |
| How do you bill for travel? (explain): Hourly for actual travel time.  |  |  |
| I agree to: (1) Be subject to the Rules of Professional Conduct, Rule 407, South Carolina Appellate Court Rules; to the Rules on Disciplinary Procedure, 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 Clerk of Court 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 Signature Applicant Date October 15-19  |  |  |
| Return completed application to:  U.S. District Court  Mediation  1845 Assembly Street  Columbia, SC 29201-2431  |  |  |
| Approved: Name W. Shedd Date 10/24/46 U.S. District Judge  |  |  |

## **SUPPLEMENT**

# 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: Edward K. Pritchard, III  |
| Firm or Office Name: Sinkler & Boyd, P.A.   |
| Office Address: 160 East Bay Street, Charleston, SC 29401   |
| Office Phone: (843) 722-3366  |
| email address: edward.pritchard@sinklerboyd.com   |
| ADMISSIONS AND AFFILIATIONS   |
| Date admitted to the Bar of the District of South Carolina: 1988 I.D. No.: 4790   |
| Date admitted to the South Carolina Bar: 1987 Bar No.: 9710   |
| Other courts or jurisdictions to which admitted (with dates of admission and bar nos.): None  |
| Membership and positions held in bar, ADR and professional associations:  South Carolina Bar House of Delegates   |
| Are you a member in good standing in each jurisdiction where admitted to practice law? X yes  |
| 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?yesX_no                       |
| EDUCATION   |
| Year law degree received 1987 Law School University of South Carolina   |
| Other professional degrees received (including year and school) Bachelor of Science in Business   |
| Administration, 1984, University of South Carolina  |
| 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:<br>Law Clerk to the Honorable Randall T. Bell, 8/87 - 8/88 |
| Sinkler & Boyd, PA, Associate, 8/88 - 1/95  |
| Sinkler & Boyd, PA, Partner, 1/95 - Present   |
|   |

## **SUPPLEMENT**

| Percentage of practice in last 5 years representing plaintiff 30 % or defense 70 %   |  |  |  |  |
|--|--|--|--|--|
| Percentage of Federal or State court practice in last 5 years: Federal 30% State 70%   |  |  |  |  |
| Number of years engaged in active litigation: 12   |  |  |  |  |
| EXPERTISE  |  |  |  |  |
| Indicate all substantive areas in which you have expertise. Place a "1" by your strongest area(s) and a "2" by all othe areas in which you have expertise. (Do not rank beyond "1" and "2.") After any category you have marked, pleas identify any sub-areas of expertise you have (e.g. "medical malpractice" after Personal Injury).  |  |  |  |  |
| 1 Admiralty       Security or Shareholders suits         Antitrust       2 Labor         1 Contracts       ERISA         Environment       2 Wrongful Termination         1 Fraud or Civil RICO       Civil Rights in Employment         1 Insurance       2 Other Civil Rights         Miller Act       2 Copyrights         1 Personal Injury       Patent         2 Product Liability       Trademark         Other (specify) |  |  |  |  |
| Publications:  |  |  |  |  |
|  |  |  |  |  |
| MEDIATION EXPERIENCE  Mediation experience (particularly in the subject matter categories above):  |  |  |  |  |
| Other courts or organizations for whom you serve as a mediator (please note any certifications):   |  |  |  |  |
| Number of mediations conducted: 8 Number of other ADR sessions conducted:  |  |  |  |  |
| MEDIATION AND OTHER ADR TRAINING   |  |  |  |  |
| Course Course No. of Provider Content Date Place Hours CCMADR Mediation Training April 25-29, 1996 Columbia, SC 40   |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

## **SUPPLEMENT**

| OTHER INFORMATION   |  |
|---|--|
| Are you familiar with the star Carolina? X yesr   | utes, rules and practice governing alternative dispute resolution in the District of Son   |
| Other relevant experience or s  | kills or other information you would like considered in connection with this application   |
|   |  |
| Cities in which you are availa  | ble to conduct mediation:  |
| X Columbia  | X Charleston Greenville X Florence   |
| Other   |  |
| Fees charged:   |  |
| Hourly Rate: \$175.00   | Minimum charge each mediation: \$ 175.00   |
| How do you bill for travel? (6  | xplain): Hourly for actual travel time.  |
| Rules for Lawyer Disciplinary<br>of the District Court; (2) Provi<br>Dispute Resolution Program I | e Rules of Professional Conduct, Rule 407, South Carolina Appellate Court Rules; the Enforcement, Rule 413, South Carolina Appellate Court Rules; and the Local Rule de mediation to indigents without pay if ordered by the Court; (3) Notify the Alternation of any change in the above facts or otherwise in my ability to perform duting finformation contained in this application to litigants and other members of the publication. |
| certify that the foregoing is t   | rue and correct.   |
|   | Signature: Supplicant Signature: June 14,2   |
|   | 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: Date:  |
| Approved:   | Initially approved by Judge D. Shedd Judge   |

3/2000