

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: L. HENRY MCKELBAR

Firm or Office Name: STROM LAW FIRM

Office Address: 1501 MAIN ST COLA. S.C. 29201

Office Phone: 803-252-4800 Office Fax: 803-252-4801

email address: HACKELLARB@STROMLAW.COM

ADMISSIONS AND AFFILIATIONS

Date admitted to the Bar of the District of South Carolina: 1974 I.D. No.: 2852

Date admitted to the South Carolina Bar: 1974 Bar No.: 3952

Other courts or jurisdictions to which admitted (with dates of admission and bar nos.):
COURT OF APPEALS - 1975 U.S. SUP. 1977

Memberships and positions held in bar, ADR and professional associations: _____

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

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

EDUCATION

Year law degree received 1974 Law School U.S.C.

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:

PRIVATE PRACTICE - 1974-1979
Assoc. Gen Counsel 1978-1991 LITIGATION, S.C. National BANK
CIRCUIT COURT JUDGE July 1991 - Aug 2002

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

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

Judge

Number of years engaged in active litigation: 28

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
- Antitrust
- Contracts
- Environment
- Fraud or Civil RICO
- Insurance
- Miller Act
- Personal Injury - *medical*
- Product Liability
- Other (specify) *BANK LAW*
- Security or Shareholders suits
- Labor
- ERISA
- Wrongful Termination
- Civil Rights in Employment
- Other Civil Rights
- Copyrights
- Patent
- Trademark

Publications: _____

MEDIATION EXPERIENCE

Mediation experience (particularly in the subject matter categories above):

CIRCUIT COURT JUDGE - 11 years

Other courts or organizations for whom you serve as a mediator (please note any certifications):

Number of mediations conducted: 0

Number of other ADR sessions conducted: 0

MEDIATION AND OTHER ADR TRAINING

Course Provider	Course Content	Date	Place	No. of Hours
<i>S.C. BAR</i>	<i>MEDIATION TRAINING</i>	<i>Aug 22-26 2002</i>	<i>COLA</i>	<i>40</i>

OTHER INFORMATION

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

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:

Columbia Charleston Greenville Florence
Other _____

Fees charged:

Hourly Rate: \$ 250 Minimum charge each mediation: \$ _____

How do you bill for travel? (explain): yes \$100 per hour

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: R. Henry McVellan Date: 8/29/02
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 by: [Signature] Date: 8/29/02
ADP Program

Approved: [Signature] Date: [Signature]
U.S. District Judge