

**PRO BONO: WHAT'S IN IT FOR ME? HOW
PRIVATE ATTORNEYS CAN DO WELL BY
DOING GOOD**

Virginia State Bar

Presented By

Standing Committee on Access to Legal Services

Today's Faculty

- Ann H. Kloeckner, Esq., Fredericksburg
Executive Director, Rappahannock Legal Services, Inc.
- Lauren D. Mehosky, Esq., Norfolk
Director of Community Engagement
Legal Aid Society of Eastern Virginia
- Amanda Reid, Esq., Fredericksburg
The Law Offices of Amanda Anne Reid, PLC

Today's goals

- Learn how pro bono enhances the legal practice of the volunteer lawyer and makes sense as a “business decision”.
- Receive information about how pro bono work might qualify for the Neighborhood Assistance Program tax credits.
- Be able to develop strategies for increasing pro bono hours from last year (or starting volunteer lawyer service if you have not previously done so).
- Gain a greater appreciation of pro bono's intangible benefits and why pro bono is simply the right thing for every lawyer to do.

Recap: Previous Pro Bono Webinar

“An Introduction to Pro Bono: We Can All Do Something”:

1. Rule 6.1 of the Virginia Rules of Professional Responsibility provides that while pro bono is not mandatory it is something that all lawyers should do.
2. The current need for pro bono legal services is staggering and there are broad ranging societal and economic consequences for failing to meet the legal needs of the poor.
3. Lawyers should engage in pro bono legal service because it is the right thing to do.

Link to recording of this webinar is found at

http://www.vsb.org/site/pro_bono/resources-for-attorneys

Ann H. Kloeckner, Esq, Executive Director, Rappahannock Legal Services, Inc.

**YOUR FRIENDLY, NEIGHBORHOOD
LEGAL AID OFFICE AS A PRO BONO
RESOURCE**

FIRST, THE RULES

VA Professional Responsibility Rule 6.1 (in relevant part)

- a) A lawyer should render at least two percent per year of the lawyer's professional time to pro bono publico legal services...
- c) Direct financial support of programs that provide direct delivery of legal services to meet the needs described in (a) above is an alternative method for fulfilling a lawyer's responsibility under this Rule.

Finally! It's about time!

It really is all about
you and your needs!

How legal aid programs will support your pro bono work



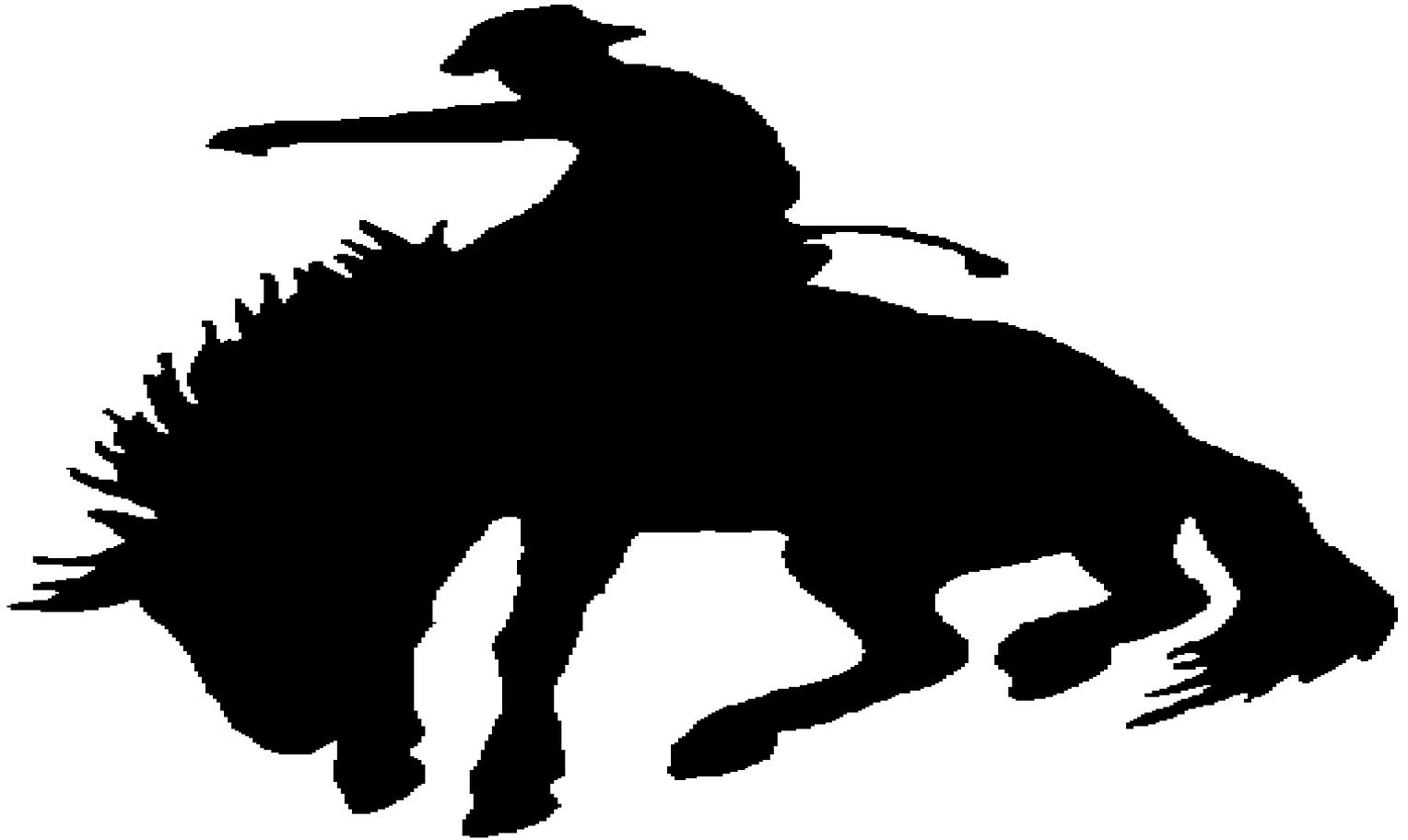
All legal aid offices have well-established private attorney involvement programs.



Virginia's Civil Legal Aid Programs

- [Blue Ridge Legal Services](#) – (540) 433-1830 (main office in Harrisonburg, offices in Winchester, Lexington, and Roanoke)
- [Central Virginia Legal Aid Society](#) – (804) 648-1012 (main office in Richmond, offices in Petersburg, and Charlottesville)
- [Legal Aid Justice Center](#) – (434) 977-0553 (main office in Charlottesville, offices in Richmond, Petersburg, and Falls Church)
- [Legal Aid Society of Eastern Virginia](#) – (757) 627-5423 (main office in Norfolk, offices in Hampton, Virginia Beach, Belle Haven, and Williamsburg)
- [Legal Aid Society of Roanoke Valley](#) – (540) 344-2088 (Roanoke)
- [Legal Services of Northern Virginia](#) – (703) 778-6800 (main office in Falls Church, offices in Arlington, Alexandria, Fairfax, Leesburg, Manassas, and Fredericksburg)
- [Rappahannock Legal Services](#) – (540) 371-1105 (main offices in Fredericksburg, offices in Culpeper, and Tappahannock)
- [Southwest Virginia Legal Aid](#) – (276) 783-8300 (main office in Marion, offices in Castlewood and Christiansburg)
- [Virginia Legal Aid Society](#) – (434) 528-4722 (main office in Lynchburg, offices in Danville, Emporia, Farmville, and Suffolk)

This ain't our first rodeo...



There is one person in every legal aid office assigned to coordinate the pro bono program.



These pro bono coordinators are your friends.

- Get to know them.
- Return their phone calls and emails.
- Be nice to them.
- Muffins are nice, fyi. 😊



I ❤️ my pro bono coordinator!



The pro bono coordinators will be thrilled to hear from you and thrilled to help you be a successful pro bono attorney.



RESOURCES FOR YOU!

- Forms, pleading banks, brochures, pamphlets, etc. Don't reinvent the wheel!



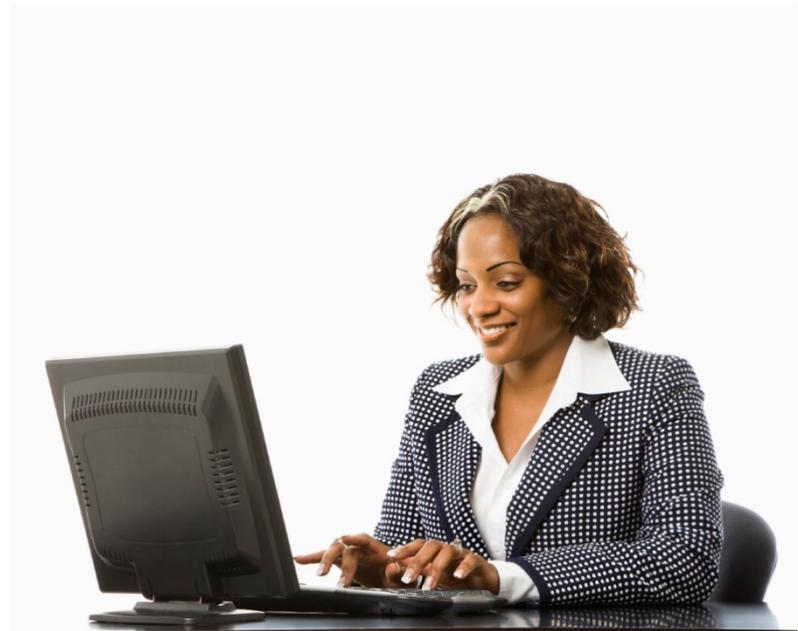
RESOURCES FOR YOU!

- Pro bono handbooks, guides, tutorials, how-to's.



RESOURCES FOR YOU!

- Probono.net/va: extensive online library, CLE calendar, volunteer opportunities in your county, listservs.
- JusticeServer: Pro bono case management and referral system
www.grbf.org



RESOURCES FOR YOU!

- Mentoring by legal aid experts



"I think I am supposed to have a mentor....but I don't know why."

MANY PATHS TO ENLIGHTENMENT

- Match your interests and legal aid's needs, your availability and their schedules.



MANY PATHS TO ENLIGHTENMENT

- Research
- Transactional work
- Updating legal aid's policies and procedures
- Updating, researching the employee manuals
- Board governance issues



MANY PATHS TO ENLIGHTENMENT

- Going to court



MANY PATHS TO ENLIGHTENMENT

- Clinics, phone advice



MANY PATHS TO ENLIGHTENMENT

- Service on board of directors



IT'S ALL ABOUT YOU AND YOUR NEEDS

- We handle the screening for eligibility.
- You concentrate on being a lawyer.



IT'S ALL ABOUT YOU AND YOUR NEEDS

- We cover your malpractice (check individual legal aid offices to confirm that).



IT'S ALL ABOUT YOU AND YOUR NEEDS

- We honor you, give you hunks of Lucite with your name on it, recognize you on our websites and in our annual reports.



Lauren D. Mehosky, Esq., Director of Community Engagement, Legal Aid Society of Eastern Virginia

NAP TAX CREDITS FOR PRO BONO WORK

SHOW ME THE MONEY!

- NAP = Neighborhood Assistance Program



What is NAP?

- Neighborhood Assistance Program (NAP) is a state tax **CREDIT** to encourage donations to non-profits who serve low-income people or an eligible student with a disability (Va. Code § 58.1-439.18 *et seq.*).
- \$15 Million Allocation by VA General Assembly
 - \$7 Million to General Human Services Organizations
 - \$8 Million to Educational Organizations

What is NAP?

- The donor receives a state tax credit of 65% of the value of a “qualified donation” (Va. Code § 58.1-439.21(B)).
- Credits only for Virginia State Taxes.
- The donor can still claim a deduction on a federal return, subject to IRS rules.

Who Can Give Me NAP Credits?

- Must be a NAP-approved organization.
 - Eligibility Criteria
- Each organization is approved for a 12-month period (July 1-June 30), and must re-apply every year.
- Two types of “Neighborhood Organizations:”
 - General Human Services
 - Education
- For a list of DSS and DOE NAP-approved organizations, go to <http://www.dss.virginia.gov/community/nap.cgi>

How Can I Get NAP Credits?

- The short answer:
 - **Donate Money or Services!!!**
- The Process:
 - *Step One*: Make a “qualifying donation” to a NAP-approved organization.
 - *Step Two*: The NAP-approved organization assists the donor to complete the appropriate form(s).
 - *Step Three*: DSS/DOE reviews the form(s), and if OK, then issues a tax credit DIRECTLY to the donor.

How Can I Get NAP Credits?

- “Qualifying Donations”
 - Made by Individuals (Va. Code § 58.1-439.24)
 - Made by Businesses (Va. Code § 58.1-439.21(B))
 - Made by Trusts (Va. Code § 58.1-439.21(B))



How Can I Get NAP Credits?

- **“Qualifying Donations” Made by Individuals**
 - What:
 - Cash (check or credit card – but watch online fees!) or marketable securities
 - NOT services (solo practitioners with no business entity – beware!)
 - Minimum Tax Credit = \$325 (\$500 donation)
 - Maximum Tax Credit = \$125,000 (\$81,250 donation)
 - Carry Forward = 5 years

How Can I Get NAP Credits?

- **“Qualifying Donations” Made by Businesses**
 - What:
 - Cash
 - Stock
 - Merchandise
 - Rent/Lease for the organization’s facility
 - Real Estate
 - ****Professional Services****
 - Contracting Services
 - Healthcare Services
 - Pharmaceutical Services
 - ****Mediation Services****
 - Minimum Tax Credit = \$400 (\$616 donation)
 - Maximum Tax Credit = No Maximum
 - Carry Forward = 5 years

How Can I Get NAP Credits?

- **“Qualifying Donations” Made by Trusts**
 - Same rules as qualifying donations made by businesses.

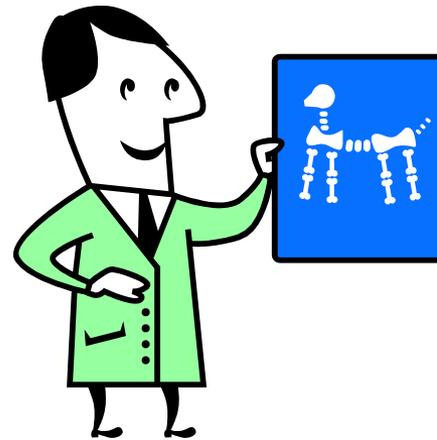
Qualifying Service Donations

- Professional Services
- Contracting Services
- Healthcare Services
- Pharmaceutical Services
- **Mediation Services**



Qualifying Service Donations

- **Professional Services** (Va. Code §§ 58.1-439.18 and 58.1-439.22)
 - The value of professional services shall not exceed the lesser of the reasonable cost for familiar services from other providers or \$125 per hour.
 - Types of services:
 - Accounting
 - Actuarial Services
 - Architecture
 - Land Surveying
 - ****Law****
 - Dentistry
 - Medicine
 - Optometry
 - Pharmacy
 - Professional Engineering
 - Veterinarian

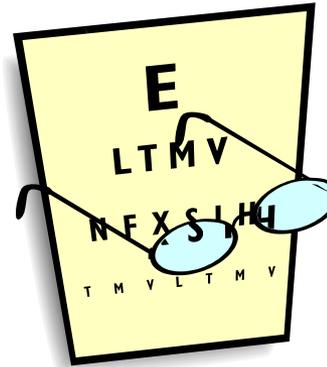


Qualifying Service Donations

- **Contracting Services** (Va. Code §§ 58.1-439.18 and 58.1-439.23)
 - The value of the contracting services shall not exceed the lesser of the reasonable cost for similar services from other providers or \$50 per hour.
 - Types of services:
 - Development
 - Construction
 - Renovation
 - Repair

Qualifying Service Donations

- **Healthcare Services** (Va. Code § 58.1-439.22(C))
 - The value of the healthcare services shall not exceed the lesser of the reasonable cost for similar services from other providers or \$125 per hour.
 - Types of services:
 - Physicians
 - Nurse Practitioners
 - Pharmacists
 - Physician Assistants
 - Dentists
 - Optometrists
 - Chiropractors
 - Dental Hygienists
 - Nurses
 - Professional Counselors
 - Clinical Social Workers
 - Physical Therapists
 - Clinical Psychologists
 - Marriage and Family Therapists



Qualifying Service Donations

- **Pharmaceutical Services** (Va. Code § 58.1-439.22(C))
 - Pharmacist providing services, without charge, to clients of a 501(c)(3) clinic on behalf of an organization no matter where the services are delivered.
- **Mediation Services** (Va. Code § 58.1-439.22(C))
 - Mediator (certified pursuant to Judicial Council of Virginia regulations) providing services, without charge, at the direction of an approved organization that provides court-referred mediation service regardless of where the services are provided.

How Can I Get NAP Credits?

- Something to note:
 - Individuals
 - The minimum donation must be made within the same calendar year.
 - Businesses
 - The minimum donation does not have to be made in the same year, but the business will not be able to use the credit until the minimum is met.

How Can I Get NAP Credits?

****DISCLAIMER****

- Each NAP-approved organization only receives a set amount of credits to give out!
- Each NAP-approved organization sets its own priorities/rules for their allocation!
- Check with the program before assuming that you will be able to receive credits!

NAP Forms

All available at

<http://www.dss.virginia.gov/community/nap.cgi>

NAP Forms

- Contribution Notification Form CNF-E: For all donations from individuals or a trust

**NEIGHBORHOOD ASSISTANCE PROGRAM
CONTRIBUTION NOTIFICATION FORM E (CNF-E)**

Required for all donations from individuals or a Trust made between July 1, 2013 and June 30, 2014

(SEE BACK FOR INSTRUCTIONS BEFORE COMPLETING)

Donations must be made directly to the approved NAP organization with no strings attached and without any conditions or expectation of monetary or other benefits from the NAP organization.

PART I: TO BE COMPLETED BY DONOR (TYPE or PRINT ONLY)

<p>_____ Name of Trust (if applicable)</p> <p>1. (Mr./Mrs./Ms./Dr.) _____ (Circle One) Name of Individual donor or Trustee of Trust (one name only)</p> <p>2. _____ Address</p> <p>_____ City, State, Zip Code</p> <p>_____ Telephone Number With Area Code</p> <p>3. Social Security #/Fed. ID # _____ (Required for Tax Documentation) Use Fed. ID # for Trust, if applicable</p> <p>4. Is donation from a Trust? <input type="checkbox"/> Yes <input type="checkbox"/> No Trust donations follow business guidelines and must meet the minimum donation value of \$616</p>	<p>5. Donation Type: Cash ___ Marketable Securities ___</p> <p>6. Date of donation: ____/____/____ to ____/____/____ (Actual date of donation / Beginning to ending date)</p> <p>7. Value of donation: \$ _____</p> <p>The minimum donation requirement of \$500 must be met between July 1 and December 31 or between January 1 and June 30 to qualify for an individual NAP tax credit.</p> <p>An individual donor may be eligible to receive a NAP tax credit for a donation value up to \$125,000 per taxable year.</p> <p>Only cash or marketable securities are eligible for individual NAP tax credits.</p> <p>Each type of donation requires a separate CNF and must meet the minimum \$500 requirement.</p>
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NOTE: Determining the effect of making a donation for tax credits on a donor's tax liability is the sole responsibility of the donor. Before making a donation or when tax-related questions occur, donors are encouraged to seek advice from their tax accountant or other tax advisor. The value of the tax credit is equal to 65% of the donation's value.

PART II: CERTIFICATION BY DONOR

I certify that the above information is accurate and describes a donation made to the Neighborhood Assistance Organization. I understand that if I falsify information, I may be subject to penalties prescribed by the Virginia Departments of Taxation and Social Services. I understand the information listed above is shared with the Virginia Department of Taxation and the Department of Education to back tax credits issued under the Neighborhood Assistance Tax Act. Please sign, date, and return this form to the NAP organization for completion. A tax credit certificate will be mailed to you from the Department of Social Services.

Date

Signature of Donor

PART III: TO BE COMPLETED BY THE NAP ORGANIZATION (TYPE or PRINT ONLY)

I certify that the above individual or trust has made the donation indicated above to this organization and I have documentation supporting the donation. I understand that if I falsify information, I may be subject to penalties prescribed by the Virginia Departments of Taxation and Social Services.

1. _____ 2. Project I.D. #: _____
(Organization Name as listed on Approval Certificate) (See Organization Approval Certificate)

3. Organization Address: _____ Phone #: _____
(Street, City, State, Zip Code) (Include Area Code)

4. Neighborhood Assistance Organization Approval Year: 07/01/2013 - 06/30/2014

Date

Signature of Neighborhood Assistance Organization Designee

NAP Forms

- Contribution Notification Form CNF-A: For all donations of cash, stock, merchandise, real estate, or rent/lease of a facility from a business

**NEIGHBORHOOD ASSISTANCE PROGRAM
CONTRIBUTION NOTIFICATION FORM A (CNF-A)**

Required for all donations of cash, stock, merchandise, real estate or rent/lease of facility
made between July 1, 2013 and June 30, 2014
(SEE BACK FOR INSTRUCTIONS BEFORE COMPLETING)

Donations must be made directly to the approved NAP organization with no strings attached and without any conditions or expectation of monetary or other benefits from the NAP organization. Discounted property, partial donations or bargain sales are not allowable for NAP tax credits.

PART I: TO BE COMPLETED BY DONOR (TYPE or PRINT ONLY)

1. _____ Name of Donating Business	6. Type of business: Corp. ___ *Sub S ___ *Partnership ___ *LLP ___ *LLC ___ *PLC ___ *PC ___ Sole Proprietor _____ (Must file Schedule C or Schedule F) (*Pass-through business entities must complete Form PTG and send to Dept. of Taxation). Refer to instructions.
2. (Mr./Mrs./Ms./Dr.) _____ (Circle One) Contact Person (Full Name)	7. Donation Type: *Cash ___ *Stock ___ *Merchandise ___ *Real Estate ___ *Rent/Leased Facility ___
3. _____ Business Address _____ City, State, Zip Code _____ Telephone Number With Area Code	8. Date of donation: ____ / ____ / ____ to ____ / ____ / ____ (Actual date of donation / Beginning to ending date)
4. Fed. ID.#/SSN # _____ (Sole Proprietor must use SSN #)	9. Value of donation: \$ _____ \$616 Minimum Donation (*Attach Required Supporting Documentation)
5. Business code _____ (Refer to Instructions)	The value of merchandise donated to be sold, auctioned or raffled is the <u> lesser </u> of the actual book cost of the item or the proceeds received by the approved organization. Exception for vehicles. Refer to instructions on back of this form.

NOTE: Determining the effect of making a donation for tax credits on a donor's tax liability is the sole responsibility of the donor. Before making a donation or when tax-related questions occur, donors are encouraged to seek advice from their tax accountant or other tax advisor. The value of the tax credit is equal to 65% of the donation's value.

PART II: CERTIFICATION BY DONOR

I certify that the value of the donation was determined in accordance with IRS standards or the exceptions listed in the instructions. I also certify that the above information is accurate and describes a donation made to the Neighborhood Assistance Organization. I understand that if I falsify information, I may be subject to penalties prescribed by the Virginia Departments of Taxation and Social Services. I understand the information listed above is shared with the Virginia Department of Taxation and the Department of Education to track tax credits issued under the Neighborhood Assistance Tax Act. Please sign, date, and return this form to the NAP organization for completion. A tax credit certificate will be mailed to you from the Department of Social Services.

Date Signature of Business Designee

PART III: TO BE COMPLETED BY THE NAP ORGANIZATION (TYPE or PRINT ONLY)

I certify that the above business has made the donation indicated above to this organization and I have documentation supporting the value of the donation. I understand that if I falsify information, I may be subject to penalties prescribed by the Virginia Departments of Taxation and Social Services.

1. _____ 2. Project I.D. # _____
(Organization Name as listed on Approval Certificate) (See Organization Approval Certificate)

3. Organization Address: _____ Phone #: _____
(Street, City, State, Zip Code) (Include Area Code)

4. Neighborhood Assistance Organization Approval Year: 07 / 01 / 2013 - 06 / 30 / 2014

Date Signature of Neighborhood Assistance Organization Designee

NAP Forms

- Contribution Notification Form CNF-C: For all donations of professional services
- Contribution Data Sheet: For donated business staff time for professional and contracting services

NEIGHBORHOOD ASSISTANCE PROGRAM CONTRIBUTION NOTIFICATION FORM C (CNF-C)

Required for all donations of Professional Services made between July 1, 2013 and June 30, 2014
(SEE BACK FOR INSTRUCTIONS BEFORE COMPLETING)

Donations must be made directly to the approved NAP organization with no strings attached and without any conditions or expectation of monetary or other benefits from the NAP organization. Discounted property, partial donations or bargain sales are not allowable for NAP tax credits.

PART I: TO BE COMPLETED BY DONOR (TYPE or PRINT ONLY)

<p>1. _____ Name of Donating Business</p> <p>2. (Mr./Mrs./Ms./Dr.) _____ (Circle One) Contact Person (Full Name)</p> <p>3. _____ Business Address</p> <p>_____ City, State, Zip Code</p> <p>_____ Telephone Number With Area Code</p> <p>4. Fed. I.D.#/SSN # _____ (Sole Proprietor must use SSN #)</p> <p>5. Business code _____ (Refer to Instructions)</p>	<p>6. Type of business: Corp. ___ *Sub S ___ *Partnership ___ *LLP ___ *LLC ___ *PLC ___ *PC ___</p> <p>Sole Proprietor _____ (Must file Schedule C or Schedule F) (*Pass-through business entities must complete Form PTG and send to Dept. of Taxation). Refer to instructions.</p> <p>7. Date of donation: ____/____/____ to ____/____/____ (Actual date of donation / Beginning to ending date)</p> <p>8. Type of Professional Service: _____ (See Instructions on Back of Form and Donor Fact Sheet)</p> <p>9. Value of donation: \$ _____ \$516 Minimum Donation (Attach Required Supporting Documentation)</p> <p>Note: For professional services donated by the proprietor or a partner, the value shall not exceed the lesser of the reasonable cost for similar services from other providers or \$126 per hour. For services donated by a salaried employee of the business, the value is the salary (excludes fringes) that such employee was actually paid while rendering the service.</p>
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NOTE: Determining the effect of making a donation for tax credits on a donor's tax liability is the sole responsibility of the donor. Before making a donation or when tax-related questions occur, donors are encouraged to seek advice from their tax accountant or other tax advisor. The value of the tax credit is equal to 65% of the donation's value.

PART II: CERTIFICATION BY DONOR

I certify that the above information is accurate and describes a donation of professional services made to the Neighborhood Assistance Organization listed below. I also certify that the listed value of the donation does not exceed statutory limits. I understand that if I falsify information, I may be subject to penalties prescribed by the Virginia Departments of Taxation and Social Services. I understand the information listed above is shared with the Virginia Department of Taxation and the Department of Education to track tax credits issued under the Neighborhood Assistance Tax Act. Please sign, date, and return this form to the NAP organization for completion. A tax credit certificate will be mailed to you from the Department of Social Services.

Date Signature of Business Designee



PART III: TO BE COMPLETED BY THE NAP ORGANIZATION (TYPE or PRINT ONLY)

I certify that the above business has made the donation indicated above to this organization, that I have documentation on the actual time donated, and the listed value of the donation does not exceed statutory limits. I understand that if I falsify information, I may be subject to penalties prescribed by the Virginia Departments of Taxation and Social Services.

1. _____ 2. Project I.D. # _____
(Organization Name as listed on Approval Certificate) (See Organization Approval Certificate)

3. Organization Address: _____ Phone #: _____
(Street, City, State, Zip Code) (Include Area Code)

4. Neighborhood Assistance Organization Approval Year: 07 / 01 / 2013 - 06 / 30 / 2014

Date Signature of Neighborhood Assistance Organization Designee

Neighborhood Assistance Program Services Contribution Data Sheet

To Be Used For Donated Business Staff Time for Professional and Contracting Services
(Use an additional Sheet of Paper if Necessary)

PRINT NAME OF BUSINESS: _____

ADDRESS: _____

CONTACT PERSON: _____ PHONE: _____

JOB TITLE	TYPE OF SERVICES PROVIDED TO NAP ORGANIZATION	DATE (List each date separately)	HOURLY RATE (excludes fringes)	TOTAL HOURS WORKED	TOTAL VALUE (Rate x Hours)

NOTE: Other formats providing the same information will be accepted. Sign and attach this form to the CNF or other format and return to the NAP Organization.

CERTIFICATION BY BUSINESS DONOR: I certify that the value of the donated service(s) was determined by the standards stated in the instructions and does not exceed the statutory maximum. I also certify I will not receive any type of compensation or reimbursement for the donated services nor will my company receive any compensation. I understand that if I falsify information, I may be subject to penalties prescribed by the Virginia Departments of Taxation and Social Services.

Date

Signature of Donor

NAP Forms

- Contribution Notification Form CNF-H: for use by a pharmacist providing pharmaceutical services to a 501(c)(3) clinic at the direction of an approved organization OR mediator providing services at the direction of an approved organization that provides court-referred mediation services

NEIGHBORHOOD ASSISTANCE PROGRAM CONTRIBUTION NOTIFICATION FORM - H (CNF-H)

For Use by a Pharmacist Providing Pharmaceutical Services to a 501(c)(3) Clinic at the direction of an approved organization or Mediator providing services at the direction of an approved organization that provides court referred mediation services between July 1, 2013 and June 30, 2014.

(SEE BACK FOR INSTRUCTIONS BEFORE COMPLETING)

PART I: TO BE COMPLETED BY THE PHARMACIST OR MEDIATOR (TYPE or PRINT ONLY)

<p>1. _____ Name</p> <p>2. _____ Address</p> <p>_____ City, State, Zip Code</p> <p>_____ Telephone Number With Area Code</p> <p>3. Social Security #: _____</p>	<p>4. Date(s) of donated services to: from: ____/____/____ to: ____/____/____ <small>(Actual date of donation / beginning to ending date)</small></p> <p>5. Value of donated services: \$ _____ <small>\$816 Minimum Donation (Each Services Contribution Data Sheet)</small></p> <p>Note: The value of donated services cannot exceed the lesser of the reasonable cost for similar services from other providers or \$126 per hour.</p>
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NOTE: Determining the effect of making a donation for tax credits on a donor's tax liability is the sole responsibility of the donor. Before making a donation or when tax-related questions occur, donors are encouraged to seek advice from their tax accountant or other tax advisor. The value of the tax credit is equal to 65% of the donation's value.

PART II: CERTIFICATION BY PHARMACIST or MEDIATOR

I certify that the value of the donated service(s) was determined by the standards stated in the instructions and does not exceed the statutory maximum. I also certify I will not receive any type of compensation or reimbursement for the donated service(s). I understand the information listed above is shared with the Virginia Department of Taxation and the Department of Education to track tax credits issued under the Neighborhood Assistance Tax Act. Please sign, date, and return this form to the NAP organization for completion. A tax credit certificate will be mailed to you from the Department of Social Services.

Date

Signature of Donor Designee

PART III: TO BE COMPLETED BY THE NAP ORGANIZATION (TYPE or PRINT ONLY)

I certify that the above pharmacist or mediator has made a donation of services at the direction of this organization and the listed value of the donation does not exceed the statutory limits. I understand that if I falsify information, I may be subject to penalties prescribed by the Virginia Departments of Taxation and Social Services.

1. _____ 2. Project I.D. #: _____
(Organization Name as listed on Approval Certificate) (See Organization Approval Certificate)

3. Organization Address: _____ Phone #: _____
(Street, City, State, Zip Code) (Include Area Code)

4. Neighborhood Assistance Organization Approval Year: 07/01/2013 - 06/30/2014

Date

Signature of Neighborhood Assistance Organization Designee

NAP Contact Information

Wanda Stevenson

Neighborhood Assistance Program Administrator
Department of Social Services

wanda.stevenson@dss.virginia.gov

nap@dss.virginia.gov

Amanda A. Reid, Esq., The Law Offices of Amanda Anne Reid, PLC

REFLECTIONS: PERSONAL AND PROFESSIONAL BENEFITS OF PRO BONO

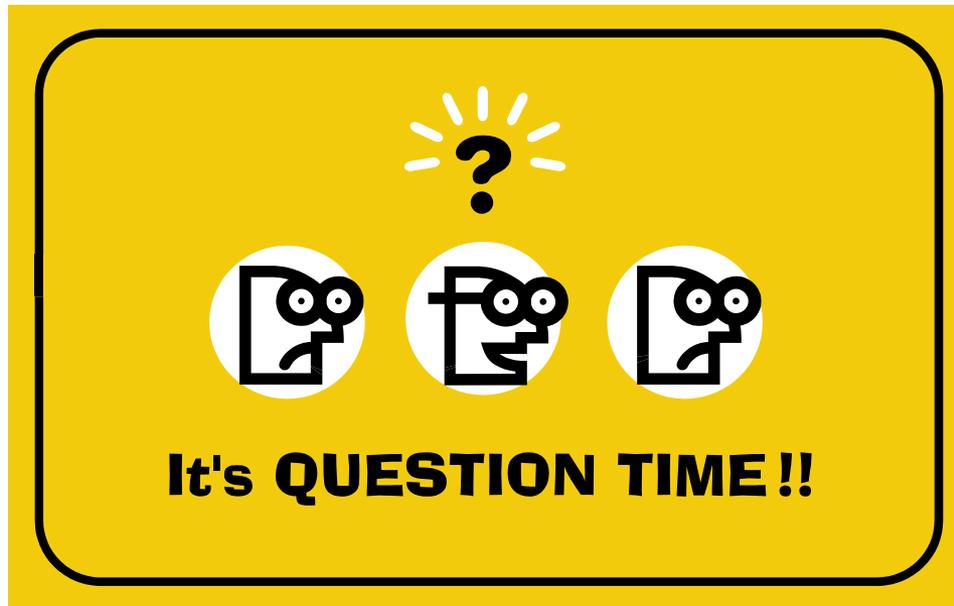
WHAT DOES A REAL, LIVE PRO BONO ATTORNEY HAVE TO SAY?



When I take a pro bono case, I get...

- Networking opportunities with other attorneys
- Chance to learn an area of law
- Access to experts at legal aid offices who can mentor
- Good public relations
- Training ground for young attorneys
- Enhanced professional image and firm profile in the legal community
- Make judges think kindly toward me for taking pro bono cases

Questions?



For more information

Contact:

Karl A. Doss

Director of Access to Legal Services

Virginia State Bar

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Richmond, VA 23219

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