

## PANEL ATTORNEY EMERGENCY PLANNING INFORMATION

Please provide us with the following information for at least one emergency contact:

**EMERGENCY CONTACT NAME:** 

**TELEPHONE NUMBER:** 

MAILING ADDRESS:

**EMAIL ADDRESS:** 

RELATIONSHIP TO PANEL ATTORNEY:

\*\* This information will be kept on file at CAP-LA and will otherwise remain confidential and not shared with the JCC or any court.

**Additional Contact Info:** 

Panel Attorney Name: State Bar No.: