

(Case No.)

(Case Name)

(Hearing Date, if known)

**FEE APPLICATION SUMMARY**

I. CLIENT - (Name of party represented)

Example: DIP, Bankruptcy Estate

II. REQUESTING APPLICANT/FIRM - (Give attorney/accountant name and nature of representation.)

Example: Collier & Norton, attorneys for the Debtor, on behalf of Penny & Dollar, Court-approved CPA.

III. TOTAL AMOUNT OF FEES REQUESTED -

- a. Fees: \$
- b. Expenses: \$
- c. Pre-petition retainer, if any: \$ \_\_\_\_\_; (of this amount, \$ \_\_\_\_\_ has previously been offset pursuant to prior fee applications)
- d. Time period covered: \_\_\_\_\_ to \_\_\_\_\_.

IV. BREAKOUT OF CURRENT APPLICATION

NAME/CAPACITY	TOTAL HOURS	RATE	TOTAL
(Collier, Atty.	20.00	\$100.00	\$2,000.00)
(Norton, Paralegal	<u>10.00</u>	35.00	<u>350.00)</u>
	30.00		\$2,350.00

MINIMUM FEE INCREMENTS - (Give minimum fee increment. Explain fully fee increments other than .1 or any other flat or unusual rates).

EXPENSES - (Give total amounts requested for expenses and specifically charge for photocopy and any in-house services such as delivery fees).

AMOUNT ALLOCATED FOR PREPARATION OF THIS FEE APPLICATION: \_\_\_\_\_

V. PRIOR APPLICATIONS:

Date of hearing	Amount requested	Amount authorized
(e.g., 1/5/87	\$2,510.00	* \$2,400.00)

\* (Explain if any of the previous authorized amounts still remain to be paid.)

VI. OTHER CO-EQUAL OR ADMINISTRATIVE CLAIMANTS IN THIS CASE:

<u>Name</u>	<u>Party Represented</u>
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Explain whether allowance of your Application will or will not result in this estate not being able to pay all co-equal or superior administrative claims in this case.

VII. RESULT OBTAINED -

For the time period covered by this Application, briefly identify the various matters for which services were rendered. For each identified matter, summarize the work performed and estimate the amount of fees allocated to such work during the time period in question. This estimate need not be exactly accurate, however the total of estimated fees must equal the amount of fees sought in this Application.