

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF OREGON

In re

Case No. \_\_\_\_\_  
Amended

**APPLICATION FOR** *[check one]*

**INITIAL**

**SUPPLEMENTAL/ADDITIONAL**

**CHAPTER 12 DEBTOR'S ATTORNEY'S  
COMPENSATION**

Debtor

The applicant, \_\_\_\_\_, by and through the undersigned, pursuant to 11 U.S.C. § 331 and Local Bankruptcy Rule (LBR) 2016-1, applies for compensation as marked above for the period from \_\_\_\_\_ to \_\_\_\_\_, and certifies the following is true and correct:

1. The following pre-filing compensation has been received in connection with this case *[indicate date, amount, payer, payer's relation to case, and description for all monies and any other consideration received]*:
2. Applicant requests allowance of compensation for legal services of \$\_\_\_\_\_ and expenses of \$\_\_\_\_\_ for a total of \$\_\_\_\_\_.
3. Applicant's prior requests for compensation in this case are as follows:

Date of Application	Amount Requested		Amount Allowed		Amount Received		Payment Source
	<u>Fees</u>	<u>Expenses</u>	<u>Fees</u>	<u>Expenses</u>	<u>Fees</u>	<u>Expenses</u>	

**Totals:**        \$                                \$                                \$

4. Applicant has not shared or agreed to share any compensation received or to be received for services rendered in connection with this case, except with a regular member, partner or associate of Applicant's firm.
5. The rate of compensation, number of hours and requested fee for each person included in this application are summarized as follows:

<u>Name &amp; Initials</u>	<u>Title</u>	<u>Hourly Rate</u>	<u>Number of Hours</u>	<u>Requested Fee</u>
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6. Attached and incorporated herein by reference are the following schedules [*check all that apply*]:

Schedule A - A narrative summary of services provided including total hours and resulting benefits to the estate of each activity category. [*Preferred, but only mandatory if application exceeds \$3,000*]

Schedule B - [*If this is the Initial Application for Compensation*] A brief narrative and itemization detailing all case related pre-petition fees. [*Itemization mandatory; narrative mandatory if compensation requested in the application exceeds \$3,000*]

Schedule C - An itemized billing setting forth a description of each event, including the date, amount of time spent, and name of the person performing each event. [*Mandatory*]

7. Applicant's expense reimbursement requests do not exceed the sums specified in LBR 2016-1, except to the extent specifically explained below:

I certify that, if required by FRBP 2002(a)(6), on \_\_\_\_\_, copies of this application, all attachments thereto, and the required notice of application prepared on [Local Bankruptcy Form 1214.5](#) were served on the debtor, trustee, and U.S. trustee; and a separate copy of only the notice was served on all creditors (or, per LBR 2002-1(j), if the applicable time period described in FRBP 2002(h) has passed, only on each entity that is listed in FRBP 2002(h)). A list of the names, addresses, and methods for service on all parties served using paper is attached. The notice served on creditors did not include the attachment, but any creditor may obtain a copy of the attachment upon request.

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Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Type or Print Applicant's Name \_\_\_\_\_ OSB# \_\_\_\_\_

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Applicant's Telephone Number \_\_\_\_\_

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Applicant's Service Address \_\_\_\_\_

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