Case No.: Chapter: Judge:					
THIS FORM MAY NOT BE USED TO REQUEST APPROVAL OF FEES IN CASES FILED UNDER, OR CONVERTED TO, CHAPTER 13 ON OR AFTER AUGUST 1, 2018.					
eertifies as follow	vs:				
	Chapter: Judge: TOR'S COUNS AL CHAPTER 1				

1. I represent the debtor in connection with the following proceeding(s) in debtor's chapter 13 case:

## STANDARD FEES

☐ Prosecution of motion on behalf of debtor.		
Nature of motion:		
Hearing date(s):		
Defense of motion on behalf of debtor (Including filing	\$400.00	
Objection to Creditor's or Trustee's Certification of Default).		
Nature of motion:		
Hearing date(s):		
Additional court appearance(s). (Not to exceed three).	\$100.00	
Purpose:		
Hearing date(s):		
Filing and appearance on a modified Chapter 13 Plan.	\$300.00	
Preparation of Wage Order	\$100.00	
☐ Preparation and filing of Amendments to Schedules D, E, F, G, H or List of Creditors		
Preparation and filing of other amended schedules	\$100.00	
Preparation and filing of Application for Retention of Professional	\$200.00	
Preparation and filing of Notice of Sale or Settlement of Controversy	\$100.00	

## NON-STANDARD FEES

Do not combine standard and non-standard fees for the same motion or service. If you believe the standard fee is inappropriate for services in a particular instance, you must request only non-standard fees for that particular service.

Desc	eribe non-standard service	s in detail,	and attach a time detail (including applic	able hourly rates) as		
Exhibit A:						
Desc	eribe non-standard expense	es in detail:	:			
2	<b></b>					
2.	To date, in this case:					
	**		g original retainer) in the amount of:			
	To date, I have receive	ed:	-			
3. I	seek compensation for ser	vices rende	ered in the amount of \$	payable:		
	☐ through the chapter 13 plan as an administrative priority.					
	☐ outside the plan.					
4.	☐ This allowance wi	☐ This allowance will not impact on plan payments.				
	☐ This allowance wi	ll impact or	n plan payments.			
	Present plan:	\$	per month for	months.		
	Proposed Plan:	\$	per month for	months.		

		Signature
Date: _		
I certify	under penalty of perjury that the above is true.	
٥.	Thave not med a supplemental fee application w	film the preceding 120 days.
5.	I have not filed a supplemental fee application w	of thin the preceding 120 days.