UNITED STATES BANKRUPTCY COURT

DISTRICT OF NEW HAMPSHIRE

In re:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Bk. No. \_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_

 Debtor Chapter \_\_\_\_\_\_

**NOTICE OF CONTINGENT HEARING ON**

**APPLICATION(S) FOR COMPENSATION**

 The application(s) for compensation of [insert name of applicant(s), e.g., Jones & Smith, PLLC, special counsel to the trustee, or Century 21 Real Estate] is (are) scheduled for a hearing before the United States Bankruptcy Court, Courtroom [insert correct courtroom location], Warren B. Rudman U.S. Courthouse, 55 Pleasant Street, Concord, New Hampshire, on [insert date and time of hearing here].

 **YOUR RIGHTS MAY BE AFFECTED**. **You should read this notice and the application(s), if attached, carefully and discuss it with your attorney. If you do not have an attorney, you may wish to consult one.**

 If you have no objection to the application(s), no action is required by you. If you do object to the application(s), or if you wish to be heard on any matter regarding the application(s), you must file a written objection with the Clerk, United States Bankruptcy Court, Warren B. Rudman U.S. Courthouse, 55 Pleasant Street, Room 200, Concord, NH 03301 on or before [insert hearing date minus seven (7) days].

 A copy of your objection or statement must be mailed or delivered to the undersigned debtor or debtor’s attorney at the address set forth below, the trustee, and the United States Trustee, and a certificate of such action must be filed with the clerk. If you file an objection or statement, you must also appear at the hearing on the date and time set forth above.

 **If no objections are filed by [insert hearing date minus seven (7) days], the court may enter an order granting the application(s) for compensation without a hearing.**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name

 Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel. No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LBF 2016-2 (Eff. 11/20/17)