

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW HAMPSHIRE

ANNEX 1 — REQUEST FOR FINAL ALLOWANCE OF COMPENSATION AND EXPENSES

Applicant _____
Representing _____

FEES:

1. Period of Services for the Entire Case	____ / ____ / ____ to ____ / ____ / ____
2. Total Hours of Services for the Entire Case	_____
3. Average Hourly Rate for the Entire Case	\$ _____
4. Total Fee Award Requested for the Entire Case	\$ _____
5. Retainer to be Credited or Already Credited Pursuant to Interim Award(s)	\$ _____
6. Fees Already Paid Pursuant to Interim Award(s)	\$ _____
7. Net Fee Payment Requested in Final Application	\$ _____
8. Approximate Total Amount of Distribution to all Creditors to Be Made in this Case (e.g., administrative, secured and unsecured)	\$ _____

EXPENSES:

1. Total Expense Reimbursement Requested for the Entire Case	\$ _____
2. Expenses Reimbursed to Date Pursuant to Interim Award(s)	\$ _____
3. Net Expense Reimbursement Requested in Final Application	\$ _____
4. Breakdown of Item No. 3 Total:	
a. Travel Expense	\$ _____
b. Postage	\$ _____
c. Photocopies (max. 20¢/pg.)	\$ _____
d. Express Mail/Messenger	\$ _____
e. Overtime Charges	\$ _____
f. Other Expenses (Itemize): _____	\$ _____
	\$ _____
	\$ _____
	\$ _____

NET TOTAL TO BE PAID (Add Fees line 7 and Expenses line 3) \$ _____