

UNITED STATES BANKRUPTCY COURT  
 EASTERN DISTRICT OF VIRGINIA  
 \_\_\_\_\_ Division

In re:

Case No. \_\_\_\_\_  
 Chapter 13

Debtor(s)

**APPLICATION FOR SUPPLEMENTAL COMPENSATION  
 OF ATTORNEY FOR DEBTOR(S)**

\_\_\_\_\_ applies for approval and payment of supplemental compensation (including reimbursement of expenses) as attorney for the debtor in the amount of \$\_\_\_\_\_.

1. The period covered by this application is from \_\_\_\_\_ through \_\_\_\_\_.
2. Fees in the amount of \$\_\_\_\_\_ having previously been paid by the debtor(s) or approved for payment through the plan.
3. The attorneys and paralegals who provided services for which compensation is requested are as follows:

Name of Attorney or Paralegal	Attorney ? (y/n)	Years in Practice	Hourly Rate	Hours	Total Fees

4. A summary of the services for which compensation is requested is as follows:

Description of Services Rendered	Date of Service	Attorney hours	Paralegal hours	Total fees

5. Fees and costs in the amount of \$\_\_\_\_\_ have been written off in the exercise of billing discretion

6. Charges \_\_\_\_\_ (have/have not) been included for preparation and noticing of the fee application and any court appearances related to the application. (If included, the amount requested is \$\_\_\_\_\_.)

7. Detailed time records and records of actual and necessary expenses are attached as Exhibit A.

\_\_\_\_\_  
Signature of applicant

Name, address, and telephone number:

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

Certificate of Service

I certify that I have this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, transmitted a true copy of the foregoing application electronically through the Court's CM/ECF system or by mail to the Debtor(s), Chapter 13 trustee, the United States trustee if other than by the electronic means, and to all creditors and parties in interest on the mailing matrix maintained by the clerk of court, a copy of which is attached.

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