

Federal Deposit Insurance Corporation
EXPERT INVOICE FOR FEES AND EXPENSES (EIF&E)

MATTER NUMBER	MATTER CAPTION
---------------	----------------

SECTION I – FIRM AND INSTITUTION INFORMATION

INSTITUTION NUMBER	FINANCIAL INSTITUTION NAME		
	CITY	STATE	
FEDERAL TAX ID NUMBER	EXPERT FIRM NAME		ADDRESS
	CITY	STATE	ZIP CODE
EXPERT FIRM CONTACT			TELEPHONE NUMBER
EXPERT FIRM ACCOUNTS RECEIVABLE CONTACT			TELEPHONE NUMBER
FDIC OFFICE LOCATION	FDIC ATTORNEY	TELEPHONE NUMBER	

SECTION II – CURRENT BILLING INFORMATION

INVOICE NUMBER	BILLING PERIOD DATE (MM/DD/YYYY)	
	FROM:	THROUGH:
FEES BILLED	EXPENSES BILLED	GRAND TOTAL

SECTION III – CERTIFICATION

I certify that the information contained herein is true and correct to the best of my knowledge and belief, and that all charges for legal services and disbursements reflected herein are in accordance with our retention agreement with the FDIC Legal Division.

NAME AND TITLE OF EXPERT (<i>Print or type</i>)	AUTHORIZED SIGNATURE	DATE
---	----------------------	------

PAPERWORK REDUCTION ACT NOTICE: Public reporting burden for this collection of information is estimated to average 1.0 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the Public Reporting Act Clearance Officer, Legal Division, Federal Deposit Insurance Corporation, 550 17th Street, N.W., Washington, DC 20429, and the Office of Management and Budget, Paperwork Reduction Project (3064-0122), Washington, D.C. 20503. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.