

EXHIBIT A

REQUEST FOR INFORMAL BUDGET DISPUTE RESOLUTION

Standing Trustee:

Assistant Director ORO:

Name: _____

Name: _____

Address: _____

Address: _____

Telephone: (____) ____-____

Telephone: (____) ____-____

FAX: (____) ____-____

FAX: (____) ____-____

United States Trustee:

NACTT Chair:

Name: _____

Name: _____

Address: _____

Address: _____

Telephone: (____) ____-____

Telephone: (____) ____-____

FAX: (____) ____-____

FAX: (____) ____-____

BUDGET ITEM(S) IN DISPUTE: _____

THREE (3) NAMES OF ACCEPTABLE PANEL MEMBERS: 1. _____

_____ The Parties have agreed to a one-member Panel. 2. _____

_____ I DECLINE TO MEDIATE. 3. _____

I hereby request informal budget dispute resolution pursuant to the United States Trustees' "Informal Budget Dispute Resolution Process" dated _____, 1997. I understand that this procedure is non-binding on either party. I hereby agree that all discussions, papers, and other communications made or submitted solely in connection with the process and

any recommendation of the Panel or fact that a recommendation was made cannot be used by either party in any subsequent administrative or legal proceeding, provided however this agreement will not apply to documents,

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work papers and other evidentiary materials related to the underlying dispute and prepared by the parties in the ordinary course of business and not generated in connection with or in anticipation of the dispute resolution process.

Date: _____

(Party's Signature)

CERTIFICATE OF SERVICE

I certify that I have served a copy of the above and foregoing Request on each of the three (3) other above named individuals by FAX this _____ day of _____, 19__.

(Requesting Party's Signature)

