



U.S. Department of Justice

Office of the United States Trustee

LIMITED WAIVER

CASE NAME: _____

CHAPTER 11 CASE No.: _____

DATE: _____

I am the attorney for the above referenced chapter 11 debtor-in-possession.

I consent to one or more contacts with my client, or my client's officers, directors, employees, if applicable, by a paralegal, bankruptcy analyst, or other non-attorney employee in the Office of the United States Trustee concerning the administrative and ministerial requirements of the United States Trustee in connection with this chapter 11 case, including by way of illustration but not of limitation, compliance with the United States Trustee's Operating Guidelines and Reporting Requirements, the proper completion of monthly operating reports, the maintenance of appropriate insurance, banking arrangements, approved banking depositories, and the payment and calculation of United States Trustee Quarterly Fees.

x _____
Attorney for the Debtor-in-Possession

Debtor In Possession Contact: _____

Telephone Number: _____ Fax Number: _____