

Federal Deposit Insurance Corporation
EXPERT BUDGET

INSTRUCTIONS: Please complete all requested information.

MATTER NO.	MATTER CAPTION
INSTITUTION NO.	EXPERT'S NAME

SECTION I - EXPERT BUDGET INFORMATION

FEES	EXPENSES	TOTAL

SECTION II - EXPERT BUDGET ACKNOWLEDGMENT

I acknowledge that the budget information contained herein is correct to the best of my knowledge and written approval of the Legal Division is required for any increase in the total budget amount.

AUTHORIZED EXPERT SIGNATURE	DATE (MM/DD/YYYY)
-----------------------------	-------------------

NAME AND TITLE OF EXPERT *(Type or print)*

TELEPHONE NUMBER <i>(Include Area Code)</i>	FAX NUMBER <i>(Include Area Code)</i>
---------------------------------------------	---------------------------------------

SECTION III - BUDGET AUTHORIZATION FOR EXPERT TO PROCEED *(FDIC Legal Division Approval Only)*

FDIC ATTORNEY <i>(Recommending approval of budget)</i>	DATE BUDGET APPROVED (MM/DD/YYYY)
SIGNATURE OF DELEGATED AUTHORITY	DATE BUDGET APPROVED (MM/DD/YYYY)

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, 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 Paper Reduction Act Clearance Officer, Legal Division, Federal Deposit Insurance Corporation, 550 17th Street, N.W., Washington, D.C. 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.