

Federal Deposit Insurance Corporation  
**LEGAL INVOICE FOR FEES AND EXPENSES**

**SECTION I – LAW FIRM AND INSTITUTION INFORMATION**

Matter Number		Matter Caption	
Institution Number	Name of Institution		
	City	State	ZIP Code
Federal Tax Number	Firm's Name		
Vendor Number	Address		
	City	State	ZIP Code
Law Firm Contact Attorney		Telephone Number <i>(Include Area Code)</i>	
Law Firm Accounts Receivable Contact		Telephone Number <i>(Include Area Code)</i>	
FDIC Office Location	FDIC Attorney	Telephone Number <i>(Include Area Code)</i>	

**SECTION II – CURRENT BILLING INFORMATION**

Invoice Number: _____	Billing Period Date <i>(MM/DD/YYYY)</i> From: ___ / ___ / ___ Through: ___ / ___ / ___	
<b>FEES BILLED</b>	<b>EXPENSES BILLED</b>	<b>GRAND TOTAL</b>

**SECTION III – CERTIFICATION**

I certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that all charges for legal services and disbursements reflected herein are in accordance with our Legal Services Agreement with the Legal Division and the Division's Outside Counsel Deskbook.

Name of Authorized Law Firm Representative <i>(Print legibly or type)</i>	Title of Authorized Law Firm Representative
Signature of Authorized Law Firm Representative	Date

**PAPERWORK REDUCTION ACT NOTICE**

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