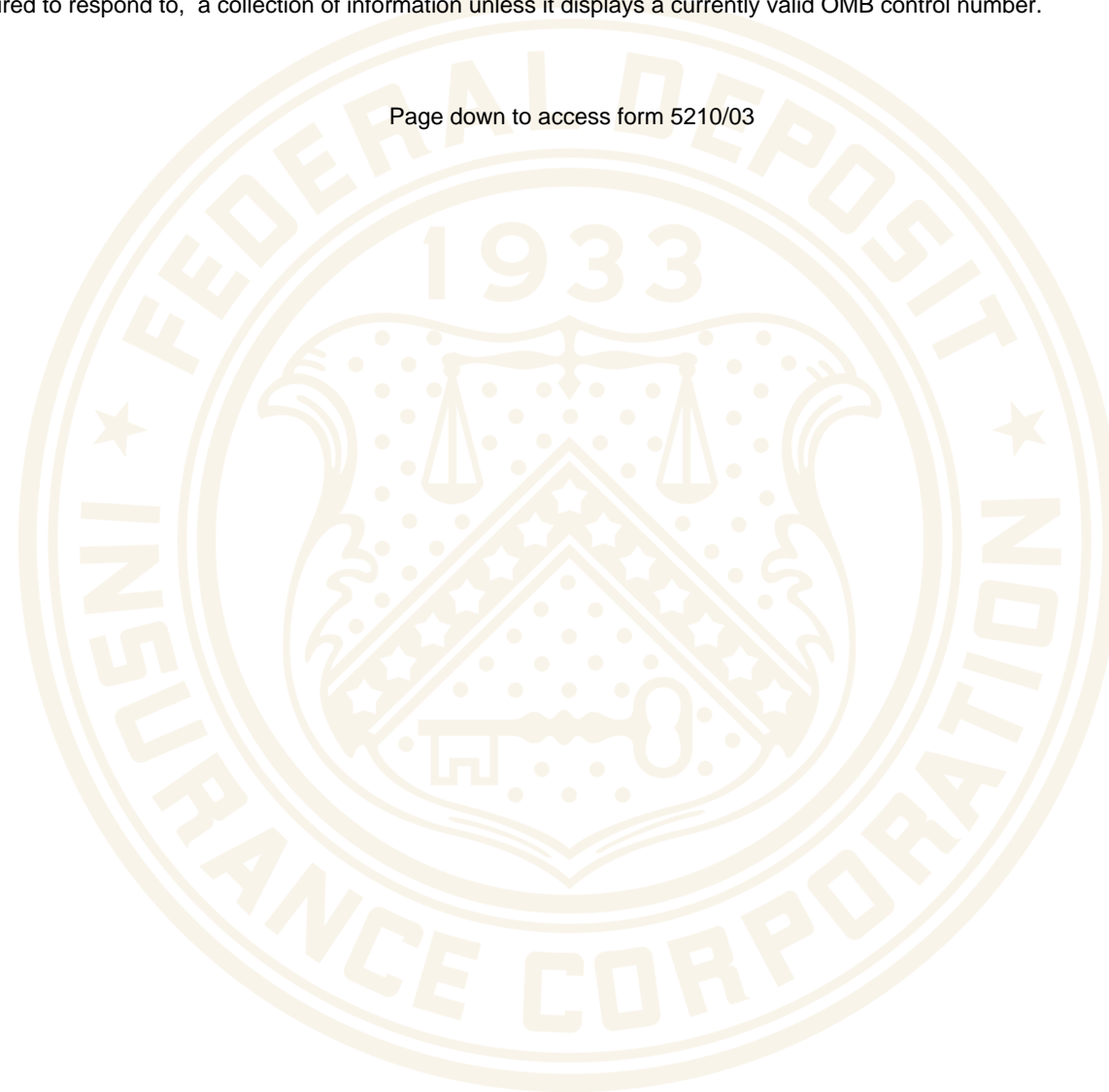

Federal Deposit Insurance Corporation
AGREEMENT FOR SERVICES
(EXPERT/LEGAL SUPPORT SERVICES (LSS) PROVIDER)
AMENDMENT

PAPERWORK REDUCTION ACT

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Federal Deposit Insurance Corporation
AGREEMENT FOR SERVICES
(EXPERT/LEGAL SUPPORT SERVICES (LSS) PROVIDER)
AMENDMENT

INSTRUCTIONS: Please provide all information requested.

Agreement for Services Effective Date

SECTION I - EXPERT OR LEGAL SUPPORT SERVICES PROVIDER INFORMATION

1. Name of Expert or Legal Support Services Provider

2. Federal Tax Identification Number

3. Branch/Office Location *(Each office of a multiple office firm/business must complete a separate rate schedule.)*

4. Address *(Street, City, State, ZIP Code)*

5. Email

6. Name of Contact Person

7. Telephone

8. Fax Number

SECTION II - BILLING

9. Complete the following

| Add or Delete | Billable Individual <i>(First, Middle, Last)</i> Alphabetical Order | Timekeeper ID | Title | Minority Status | Gender | Hourly Rate | Fixed Rate |
|---------------|---------------------------------------------------------------------------|---------------|-------|-----------------|--------|-------------|------------|
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