**LOCAL BANKRUPTCY FORM 2016-1**

**IN THE UNITED STATES BANKRUPTCY COURT**

**FOR THE MIDDLE DISTRICT OF PENNSYLVANIA**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **IN RE:** |  |  | | |  |
| **Enter text** |  | **CHAPTER:** | **Enter text** | | |
|  | **Debtor(s)** | **CASE NO.** | | **- -bk-** | |

**SUMMARY COVER SHEET**

**FEES AND EXPENSES APPLICATION**

|  |  |
| --- | --- |
|  | Your applicant was appointed on **Select date**, based on an application filed **Select date**. |
|  | Your applicant represents **Enter text**. |
|  | This application is a **Enter text**.  (state whether interim or final application). |
|  | The total amount of compensation for which reimbursement is sought is **Enter text** and is for the period from **Select date** to **Select date**. |
|  | The total amount of expenses for which reimbursement is sought is **Enter text** and is for the period from **Select date** to **Select date**. |
|  | The dates and amounts of any retainer received are **Enter text**. | |
|  | The dates and amounts of withdrawals from the retainer by the Applicant are **Enter text**. | |
|  | The dates and amounts of previous compensation allowed are: **Enter text**. |
|  | The dates and amounts of previous compensation paid are: **Enter text**. |
|  | There are/are not objections to prior fee applications of Applicant that have not been ruled upon by the Court in this bankruptcy case. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dated: | **Select** **date** |  | **Enter text** |  |

Applicant’s Signature