UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF ALABAMA

IN RE:	CHAPTER 13 CASE No.
NAME [include <u>both</u> Debtors if jo	ointly filed bankruptcy case],
Debtor(s).	
ADVISEMENT BY THE COURT A INTEREST FILES A RESPONSE SERVICE. RESPONSES MUST I MANNER DIRECTED BY M.I ELECTRONICALLY OR BY U.	BR 9007-1, THIS FILING WILL BE TAKEN UNDER ND MAY BE GRANTED/APPROVED UNLESS A PARTY IN WITHIN TWENTY-ONE (21) DAYS OF THE DATE OF BE SERVED UPON THE MOVING PARTY AND, IN THE D. ALA., LBR 5005-4, FILED WITH THE CLERK S. MAIL ADDRESSED AS FOLLOWS: CLERK, U.S. URCH STREET, MONTGOMERY, AL 36104.
	TO EMPLOY PROFESSIONAL PERSON OR A SPECIFIC PURPOSE
COMES NOW, the undersign	gned counsel, and respectfully submits the instant application
to employ professional persons pur	suant to 11 U.S.C. § 327 and Rule 2014 of the Federal Rules
of Bankruptcy Procedure and in sup	pport of said application states as follows:
The debtor(s) desires to reta	in of the firm
in[City], County, (State), for the specific
purpose of recovering damages aris	ing out of a cause of action filed by the debtor(s) against
This c	ause of action is in the nature of a that
occurred on or about	This attorney was previously retained by the Debtor.
I,·	, am duly licensed to practice law in the State of
I,	, was initially employed by the debtor to represent

him/her and am familiar with the facts and legal issues involved in the case.

(REV. 10/2024)

I,, do not represent or hold any interest adverse to	the
debtor or to the estate with respect to the matter on which such attorney is to be employed.	
Attached and submitted hereto is an affidavit executed by	
in support of this application pursuant to 11 U.S.C. § 327 and Rule 2014 of the Federal Rules	of
Bankruptcy Procedure. I, [name of attorney being retained]	ed]
have no connections with the debtor, creditors, any parties in interest, the Bankrup	tcy
Administrator, or the Trustee, other than with the representation of the debtor and upon grant	ing
of this application, the estate, in the representation of the estate in this action.	
The debtor has signed a contract with [name of attorn	геу
being retained] for representation regarding the cause of action. The terms of the contra	act
include, plus reimbursement of out-	of-
pocket expenses. No money has been paid to the attorney prior to the filing of this Applicati	on.
I understand that I cannot share any compensation with attorneys other than members of my fi	rm
unless said professionals are also approved by this Court. I do not have any agreement to sh	are
compensation with other attorneys in this matter except: [name of referring	or
associated attorney(s)]. The attorney understands he/she must make application to the Court	for
approval of his/her fees and expenses. However, if there is no recovery,	
[name of attorney being retained] acknowledges that the bankruptcy estate of	
[debtor] shall not be responsible for reimbursement of attorney's fees or for any out-of-poc	ket
expenses.	
WHEREFORE, the above premises considered, I move this Honorable Court to author	ize
the employment of [name of attorney being retained] to represent the estate	in
the cause of action filed by the Debtor. Upon settlement or completion of the cause of acti	on,

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	will apply to the	Court for approval of fees and expenses
pursuant to 11 U.S.C. §§ 326, 327, 32	28 and Rules 20	014 and 2016 of the Federal Rules of
Bankruptcy Procedure.		
Respectfully submitted this	day of	20
	[Name of att	torney being retained]
ADDRESS PHONE AND FAX #'S EMAIL		
<u>CERTII</u>	FICATE OF SE	RVICE
I hereby certify that on this date, a true EMPLOY PROFESSIONAL PERSON V		
By CM/ECF:		
(Name), Debtor(s) Bankruptcy Attorney Email address		
Sabrina L. McKinney, Standing Chapter 13trustee@ch13mdal.com	13 Trustee	
Danielle K. Greco, Bankruptcy Administration ba@almba.uscourts.gov	trator	
by First Class Mail, postage prepaid:		
Name of Debtor(s) Address		
Other:		
Dated:		
		/s/ [Name of attorney being retained] Address Phone Email

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF ALABAMA

IN RE:	CHAPTER 13 CASE No
NAME [include both Debtors if joint	tly filed bankruptcy case],
Debtor(s).	
STATE OF	
COUNTY OF	
	OF APPLICATION FOR EMPLOYMENT OF ERSON FOR A SPECIFIC PURPOSE
Before me the undersigned au	thority, a notary public, in and for said state and county,
personally appeared	[name of attorney being retained], who, being duly
sworn by me, deposes and says under o	oath as follows:
My name is	[name of attorney being retained]. I am presently
affiliated with	[name of law firm] whose office is
located at	[provide street address, City, County, and State].
I am an attorney duly admitted to the p	practice of law in the State of I was engaged
	her/him regarding a cause of action against [name of defendants] on
	entation with the debtor are for compensation on a [state terms of contract]
	et expenses. However, if there is no recovery, the
undersigned acknowledges the bankru	ptcy estate of [name of debtor] shall
not be responsible for payment of any	y attorney's fees or for the reimbursement of any out-of-

(REV. 10/2024)

pocket expenses. To date, I have not received any compensation from the debtor or any other

entity in connection with my representation. I understand that I cannot share any compensation

with attorneys other than members of my firm unless said professionals are also approved by this

Court. I do not have any agreement to share compensation with other attorneys in this matter

except: _____ [name of referring or associated attorney(s)].

I do not represent or hold any interest adverse to the debtor or the estate with respect to

the matter upon which I am seeking to be employed.

I have no connection with the Trustee, creditors, Bankruptcy Administrator, or any other

parties in interest, the debtor, or their respective attorneys, other than with the representation of

the debtor in the lawsuit for which I am applying for my employment as a professional person

for this specific purpose.

The facts as stated herein are true and correct in all cases where I have personal

knowledge and other remaining facts and opinions are true and correct according to the best of

my knowledge, information, and belief. I understand that upon completion of this case, by

settlement or otherwise, I must file a separate application for the approval of any settlements

recovered on behalf of the debtor and/or the estate pursuant to M.D. Ala., LBR 9007-1. I also

understand that I must file a separate application for the approval of my fees and expenses

pursuant to 11 U.S.C. §§ 326, 327, 328 and Rules 2014 and 2016 of the Federal Rules of

Bankruptcy Procedure.

Mama of attowney being notained?

[Name of attorney being retained]

STAT	E OF
COUN	VTY OF
	Sworn to and submitted before me on this the day of
(Seal)	
	Notary Public
	My Commission expires: