# **SAMPLE**

# UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF ALABAMA

IN RE:	CHAPTER 13 CASE No.
NAME [include both Debtors if jointly filed b	oankruptcy case],
Debtor(s).	
PURSUANT TO M.D. ALA., LBR 9007-1, ADVISEMENT BY THE COURT AND MAY BE INTEREST FILES A RESPONSE WITHIN TO SERVICE. RESPONSES MUST BE SERVED MANNER DIRECTED BY M.D. ALA., ELECTRONICALLY OR BY U.S. MAIL AND BANKRUPTCY COURT, ONE CHURCH STREET	E GRANTED/APPROVED UNLESS A PARTY IN WENTY-ONE (21) DAYS OF THE DATE OF UPON THE MOVING PARTY AND, IN THI LBR 5005-4, FILED WITH THE CLERE ADDRESSED AS FOLLOWS: CLERK, U.S.
APPLICATION TO APPROVE A	ITORNEY FEES AND EXPENSES
COMES NOW, the undersigned attorney	, whose employment was approved by this
Honorable Court pursuant to 11 U.S.C. § 327 in	the above-styled case and respectfully requests
this Honorable Court approve attorney fees and	expenses incurred in conjunction with the
representation and subsequent proposed settleme	ent of the debtor(s) claim as follows:
1. On or aboutundersigned counsel and for that represe undersigned attorney fees of% of an reasonable expenses. The undersigned h Court for the approval of this employment on	ntation agreed to pay the y recovery, plus reimbursement of as filed an application with this
2. The undersigned obtained a total settle the agreement executed by the Debtor(s) undersigned is entitled to attorney fees in which represent% of the gross recove being shared with [name of referring whose employment has also been approved.  3. The undersigned incurred expenses of for medical records, \$ in copying 6.	and approved by this Court, the amount of \$

(REV. 10/2024)

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during the course of handling this case. (Include any other actual expenses in this paragraph.)

4. The undersigned counsel has filed a motion for the approval of the settlement reached in this case.

y petitions this Honorable Court to approve
penses \$
, 20
By:
[Name of attorney]

#### **CERTIFICATE OF SERVICE**

I hereby certify that on this date, a true and correct copy of the foregoing APPLICATION TO APPROVE ATTORNEY FEES AND EXPENSES was served as follows:

#### By CM/ECF:

(Name), Debtor(s) Bankruptcy Attorney Email address

Sabrina L. McKinney, Standing Chapter 13 Trustee 13trustee@ch13mdal.com

Danielle K. Greco, Bankruptcy Administrator ba@almba.uscourts.gov

#### by First Class Mail, postage prepaid:

Name of Debtor(s) Address

All Creditors (listed on Creditor matrix in Bankruptcy Case)

# **SAMPLE**

Other:	
Dated:	
	/s/
	[Name of attorney being retained]
	Address
	Phone
	Email