

6. For each amount claimed, please attach itemization information indicating service provided, date, hours, and rate (28 U.S.C. § 2412(d)(2)(A)).

	Amount Claimed
A. Attorney Fees	\$ _____
B. Study	_____
C. Analysis	_____
D. Engineering Report	_____
E. Test	_____
F. Project	_____
G. Expert Witness Fees	_____
H. Other Fees and Expenses--Specify	
1. _____	_____
2. _____	_____
3. _____	_____
I. Total Fees and Expenses	\$ _____

Attorney for Applicant

Name of Law Firm

Street Address

City, State and Zip Code

Telephone Number

Date: _____

(Added Oct. 3, 1984, eff. Jan. 1, 1985; and amended Sept. 30, 2003, eff. Jan. 1, 2004.)