

Federal Deposit Insurance Corporation
**OUTSIDE COUNSEL LEGAL SERVICES AGREEMENT (LSA)
RATE SCHEDULE**

LEGAL SERVICES AGREEMENT
EFFECTIVE DATE (MM/DD/YYYY)

INSTRUCTIONS: Each office of a multiple office firm must complete a separate Outside Counsel Legal Services Agreement E-billing Rate Schedule (E-billing Rate Schedule). All amendments to this E-billing Rate Schedule, i.e., firm's name, Tax Identification Number, address, contact attorney, telephone/fax numbers, billable individuals, or additions/deletions, must contain the information shown on the Legal Services Agreement E-billing Amendment form (E-billing Amendment form). Contact the Legal Financial Specialist responsible for processing your firm's invoices, or dial 1-800-846-1901, to request copies of the E-billing Amendment form, or download the form from the FDIC website at <http://www.fdic.gov/formsdocuments/5210-06-E.doc>. **NOTE:** Use the mouse or tab key to move to the next field. Attach continuation sheets if necessary.

SECTION I – OUTSIDE COUNSEL INFORMATION

NAME OF LAW FIRM FEDERAL TAX IDENTIFICATION NUMBER

BRANCH/OFFICE LOCATION

ADDRESS CITY STATE ZIP CODE E-MAIL ADDRESS

NAME OF CONTACT ATTORNEY PHONE NUMBER (include Area Code) FAX NUMBER (include Area Code)

BILLABLE INDIVIDUAL (First Middle Last) Alphabetical Order	TIMEKEEPER ID	STATE LICENSES	POSITION	YEARS IN PRACTICE	MINORITY STATUS	GENDER (M or F)	STANDARD RATE	PERCENT (%) DISCOUNT	PROPOSED FDIC RATE
			P (Partner) A (Associate) PP (Paraprofessional) O (Other) - specify		A (Asian American) B (Black American) H (Hispanic American) N (Native American)				

SECTION II - SIGNATURES

SUBMITTED BY (Name and Signature of Law Firm's Authorized Representative) TITLE DATE SIGNED (MM/DD/YYYY)

NAME OF FDIC DELEGATED APPROVING OFFICIAL (Please print legibly or type) TITLE DATE SIGNED (MM/DD/YYYY)

SIGNATURE OF FDIC DELEGATED APPROVING OFFICIAL LEGAL DIVISION OR OFFICE EFFECTIVE DATE (MM/DD/YYYY)

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