

**UNITED STATES COURT OF APPEALS
FOR THE NINTH CIRCUIT**

Form 9. Application for Attorneys' Fees under Circuit Rule 39-1.6

Instructions for this form: <http://www.ca9.uscourts.gov/forms/form09instructions.pdf>

9th Cir. Case Number(s)

Case Name

For each amount claimed, please attach itemized information indicating service provided, date, hours, and rate.

<i>DESCRIPTION OF SERVICES</i>	<i>Hours</i>	<i>Amount Claimed</i>
Interviews and Conferences	<input style="width: 60px; height: 20px;" type="text"/>	\$ <input style="width: 100px; height: 20px;" type="text"/>
Obtaining and Reviewing Records	<input style="width: 60px; height: 20px;" type="text"/>	\$ <input style="width: 100px; height: 20px;" type="text"/>
Legal Research	<input style="width: 60px; height: 20px;" type="text"/>	\$ <input style="width: 100px; height: 20px;" type="text"/>
Preparing Briefs	<input style="width: 60px; height: 20px;" type="text"/>	\$ <input style="width: 100px; height: 20px;" type="text"/>
Preparing for and Attending Oral Argument	<input style="width: 60px; height: 20px;" type="text"/>	\$ <input style="width: 100px; height: 20px;" type="text"/>
Other (<i>specify below</i>) <div style="border: 1px solid black; height: 100px; width: 450px; margin-top: 5px;"></div>	<input style="width: 60px; height: 20px;" type="text"/>	\$ <input style="width: 100px; height: 20px;" type="text"/>
<i>Total Hours/Compensation Requested:</i>	<input style="width: 60px; height: 20px;" type="text"/>	\$ <input style="width: 100px; height: 20px;" type="text"/>

Signature **Date**

(use "s/[typed name]" to sign electronically-filed documents)

Feedback or questions about this form? Email us at forms@ca9.uscourts.gov